

State Health Board Gets \$15,470 From Rockefeller Fund

Another gift of \$15,470 has been received by the Alabama State Board of Health from the International Health Board of the Rockefeller Foundation, to be expended in 16 counties for the promotion of the Maternal and Infant Welfare Nursing programs of county health units.

The gift, the donation of which was announced yesterday by Dr. Stuart Graves, state health officer, is made under the auspices of the U. S. Public Health Service, which, it is stated, has selected Alabama for further study of a special field of health work in which Alabama has achieved outstanding success.

Work for which the money donated will be expended, will be carried out in the following counties: Baldwin, Barbour, Colbert, Covington, Cullman, Dale, Dallas, Escambia, Houston, Lee, Limestone, Marshall, Monroe, Morgan, Sumter and Tallapoosa.

During the last ten years, it was announced, Alabama's infant death rate from preventable diseases has shown a marked decrease, and the new Rockefeller gift makes possible a continuation of the work of decreasing this rate still further.

MONTGOMERY, ALA.
ADVERTISER

MAR 31 1930 THE RURAL NEGRO'S NEED FOR MEDICAL ATTENTION

In the current number of The Outlook and Independent, Archibald Rutledge has a vigorous article on the health needs of the Southern Negro. Poor, superstitious and often isolated, the rural Negroes of the South get and expect little medical attention, he declares; typhoid and social diseases are prevalent in the rural districts usually in such advanced stages that cure is impossible even in cases where medical assistance is available.

"Whatever may have been its original stamina," the well known Southern author asserts, "the Negro race is now one peculiarly liable to disease. I believe that ethnology teaches that in the contacts of unequal races, the secondary race is peculiarly liable to succumb to those vices and those diseases against which the dominant race has, by slow inoculation, gradu-

ally fortified itself.

"The hydra-headed demon syphilis, together with its related furies—all other forms of venereal disease—these plagues constitute the greatest menace that the Negro race in America now faces. Statisticians hold that sixty-five per cent of the black race have this insidious infection, as against twenty-seven per cent of the white race."

Tuberculosis, Mr. Rutledge maintains, is the inevitable result of "small cabins, overheated stoves, poor clothing, poor food," and the practice of drinking from rain-pools and shallow wells often results in typhoid.

In spite of the obvious need for medical and missionary work on the type so successfully conducted by Sir Wilfred Grenfell in Newfoundland, the writer believes that the South's anxiety to preserve white supremacy will make it extremely difficult to bring adequate medical assistance to the Negro.

"It is fitting to ask," Mr. Rutledge concludes, "does the South desire the welfare of the Negro? Speaking as a Southerner, who has lived for twenty-seven years in the North, I may say that such a question should not be answered categorically. It should be scanned. And probably we should define welfare. If it means the condition in which the Negro is happiest and the white man safest, the South religiously desires it. But if it means a movement toward social and political equality, tending at length toward rivalry and consequent bloodshed, the South does not desire it. At no cost is the South willing to jeopardize the integrity of white civilization."

This last paragraph is somewhat irrelevant. The Negro's physical welfare is not jeopardized because of the white man's interest in maintaining his own supremacy. That has nothing whatever to do with this health matter. Plain neglect is back of the difficulty.

BAKER TAKES STATE OFFICE NEXT WEEK

**New Health Chief Has Had
Notable Career In Medical Practice**

Dr. J. N. Baker, whose election as State Health Officer yesterday was confirmed by the Alabama Medical Association, will take over his new duties next

week, probably during the early part of the week, it was announced last night.

In entering upon the work as State Health Officer, Dr. Baker has a background of long experience in public health work, having formerly served on the State Committee of Public Health during the administration of the late Dr. Samuel Welch.

Dr. Baker is a native of Virginia and has been a resident of Montgomery since 1900.

His career is outlined in the following account from "Who's Who in Medicine":

"Dr. James Norman Baker graduated from the University of Virginia, after which he took post graduate courses in Johns Hopkins at Baltimore and the Massachusetts General Hospital in Boston. He was an interne at St. Vincent's Hospital in Norfolk, Va., in 1898 and '99. He was surgeon in charge of the Plant System Hospital in Waycross, Ga., after which he moved to Montgomery, Ala., in 1900.

"During the World War Dr. Baker served as a major in various capacities. He organized the doctors of Alabama into a reserve corps. He was military adviser to the Governor of Alabama, chief of surgical service at base hospital in Camp McClellan in Montgomery, in 1917, commanding officer at evacuation hospital, Number 45 mobilized at Fort Oglethorpe, Ga.

"As a medical practitioner, he has been engaged in the practice of female urology and general surgery, special written articles on surgery and female urology. He has been surgeon for the Atlantic Coast Line Railway, the Central of Georgia, U. S. Employees Compensation Commission; surgeon for the Southern Bell Telephone Company. Member of Alabama State Medical Association, secretary 1902-1914, president in 1915; member of Southern Medical Association and Southern Surgical Association, vice president 1921 of surgeons of Atlantic Coast Line Railroad. President 1916 of Surgeons of Central of Georgia Railroad. He has been a member of the board of censors of the State Medical Association of Alabama, member of board of medical examiners of Alabama and a member of the Board of Medical Examiners of Nurses of Alabama. He was president of the Montgomery Medical Association of Montgomery County in 1926."

Alabama Birth Rate Declines Off In 1929 With Rise In Percentage Of Deaths

Dr. W. T. Fales, director of the bureau of vital statistics of the State Health Department, in a tabulation made public yesterday in which he presents a comparison of provisional birth and

death rates in Alabama for 1929 with the rates for the two previous years, shows that in 1929 the birth rate decreased slightly from the previous year, 1928; while the general death rate was slightly higher, 12.5 per 1,000 of population, against 12.4 for 1928. He states, however, that if the excess mortality from influenza during January was eliminated the general death rate for last year would have been slightly lower than that for 1928.

The chief cause of death was again disease of the heart, 136.3 per 100,000 of population. Influenza was second with a rate of 121.3 against 72.3 in 1928 and 30.4 in 1927. Chronic nephritis, pneumonia, tuberculosis, accidents and diseases of early infancy were the next most frequent causes of death.

Of the deaths from communicable diseases, it is noted that for the first time since 1916 there were no deaths from smallpox in Alabama. Further improvement was shown in typhoid fever, the death rate being 1.5 against 9.4 in 1928. It is shown also that the death rate from pellagra showed a slight decrease and that there was a decrease in deaths from tuberculosis.

It is pointed out by Dr. Fales, though, that on the other side of the scale, the death rate from malaria, increased materially from 11.4 per 100,000 of population in 1928, to 16.6 last year. Deaths resulting from injuries received in automobile accidents also showed a considerable increase. These two increases and that for influenza, are the only unfavorable records for 1929.

For the month of February of the present year, 4,822 births were recorded in Alabama and 2,449 deaths; the birth rate being 24.2 per 1,000 of population and the death rate 12.3. In Montgomery County the birth rate for February was 15.6 and the death rate 22.1. For Jefferson County the birth rate was 24.8 and the death rate 14.5. In Mobile County the birth rate was 20.8 and the death rate 19.6.

Baker To Ask Part Of Rosenwald Fund

In an effort to have made available for Alabama a portion of the \$75,000,000 Julius Rosenwald Foundation Fund for eradication of negro tuberculosis in the state, Dr. J. N. Baker, state health officer, will leave Monday for Washington for a conference with Surgeon Gen. Hugh S. Cumming and other state health officers.

There is a pressing need for specialists to work among tubercular negroes in the state, Dr. Baker said. The negroes, he said, have proven more susceptible to the disease than the whites and the mortality rate among negroes from the disease is four times greater than with white persons.

NEGRO WORKER EMPLOYED

ANNISTON, Ala., Dec. 5—The Negro Health Extension Service, an organization to better health conditions for Anniston's negro population, has employed a negro worker, Jacob Jones. The organization is made up of business and industrial leaders of Anniston.

Object of the association is to help curb the spreading of disease by educational work among the negroes. Leaders pointed out that the white people would benefit from the movement in that better living conditions for negroes and less disease among them reduced the chances of white people being infected by servants.

NEGROES TO HEAR HEALTH OFFICER

Dr. Ralph Stewart, U. S. Service, To Make Address

A mass meeting of negro women and girls will be held in the Colored Masonic Temple, Fourth Avenue and Seventeenth Street, North, Tuesday where Dr. Ralph Stewart, medical officer of the U. S. Public Health Service, will speak.

Dr. Stewart is traveling through the South lecturing to negroes. The movement has the endorsement of the State Health Department. Dr. Stewart has been in touch with Dr. Dowling, of this city, and has his support as well as that of other health agencies.

Dr. Stewart says an effort is being made to induce parents to promote more companionable relations with their children, and have them stop trying to keep the children ignorant.

A meeting will be held at the same place Wednesday night, for men and boys. Both meetings will start at 8 p.m.

EL DORADO, ARK.

NEWS

NOV 9 - 1930

THE HEALTH UNIT

QUORUM court meets Monday to fix the budget for general county appropriations for the ensuing fiscal year. The tentative budget submitted to members of the court by County Judge J. G. Ragsdale shows a considerable reduction in order to keep the appropriations within the anticipated revenues of the county next year.

The people will generally approve most of the economies planned by the county judge, though there will be kickers on any item reduced by people whose pocket books may be affected.

The proposed budget, however, makes one slash which is unreasonable, uncalled for, and unwise. This is reducing the appropriation for the county health unit from \$6,000 to \$3,000, just exactly half.

On the contrary this item in the budget should have about a 100 per cent increase. No one can read the report of Dr. E. W. Prothro, director of the county health unit, to be made to the court Monday, without concluding that health conditions in Union county are far from satisfactory.

The flood calamity of several years ago, the drouth conditions of the past summer, each set in motion diseases of different types which have been hard to control. In addition Union county has an unusually large Negro population in comparison with its whites.

Negroes are generally ignorant of sanitary and disease preventative measures. Suffering under economic hardships to a greater degree than their white neighbors also reduces the quality and amount of their food and renders them less resistant to disease.

The Negroes not only are entitled to the health unit service because they are citizens and taxpayers, but for the reason that a contagious disease in a negro will spread to his white neighbor just as quickly as whites contract diseases from each other.

The problem of health in Union county is a big one. Conditions next year will be worse than this year since during this winter many white city families will have their vitality reduced because of unemployment and many country families because of the drouth.

It is a wise old adage which says an ounce of prevention is worth a pound of cure. But the proposed budget, so far as the health unit work is concerned, seems to be based on an exact opposite principle in the face of unusual conditions.

"Where is the money to come from?" is a question sure to be asked in quorum court. That is a question to be answered by Judge Ragsdale and the court.

Health-1930

Connecticut.

MAR 21 1930
TIMES

Hartford Conn
THE RIGHT TO BE DIRTY.

Information which Sanitary Inspector Dominick J. Murphy has laid before the health board regarding living conditions in some of the east side tenements shows the difficult situation in social guidance that it is impossible to legislate people into cleanliness. Certain conditions about the safety and sanitation of buildings can be regulated and enforced, but the care of the interior and use of the furnishings are manifestly the sole right and responsibility of the tenant. Adults, outside penitentiaries and military schools, cannot be forced by law to sweep their corners or change their linen.

Here is an opportunity for personal guidance. It very distinctly places a task before the Negro leaders and organizations in this city and they are the ones best situated to lend a helping hand to those of their race, coming from the south where living conditions permit of more care-free treatment. The problem can be effectively solved only by winning the co-operation of the tenants directly concerned. Racial kinship and sympathetic understanding should be of great help.

Health - 1930

Florida.

Tampa, Fla. Times
Tuesday, April 1, 1930

Negroes to Hear Talks on Health

Captain M. J. Mackler, assistant city health officer, will give a talk on health to negro school children in the city this afternoon at 3:15 o'clock at the Negro Catholic school auditorium as the opening meeting of Tampa's participation in the national negro health week.

Dr. A. J. White, of the city health department, has made arrangements for health talks to be given by doctors in each of the rooms of negro schools tomorrow. Thursday from 10 to 12 a.m. and 2 to 4 p.m., talks and illustrations for adults will be given at the Clara Frye hospital for females and the Venzula Small hospital for males. Negro dentists in the city have also volunteered two hours a day of their time this week for the inspection of school children's teeth.

This week marks the sixteenth celebration of negro health week in Tampa under the auspices of the Tampa Urban league with the city health department co-operating.

"The matter of health among the negroes is one that all white people should be vitally interested in and lend their full support," Mr. Mackler said. "The health of white people depends to a large extent on the health of the negro, for negroes are employed in the home as cooks, maids, washwomen and nurses making their health a matter of supreme importance to white people's health."

TAMPA, FLA.

Tribune
APR 23 1930
**NEGRO HEALTH
WORK IN STATE
TO BE EXTENDED**

Convention Here Told Of New Clinic Plans

Plans for expansion of health work among the negro population of Florida

were explained last night by Dr. Henry Hanson, state health officer, to members and visitors attending the annual convention of the State Negro Medical, Dental and Pharmaceutical association, at a public session in the St. Paul A. M. E. church. The three meetings yesterday will be followed by sessions today and tomorrow at Elk's Rest lodge, Constance and Jefferson streets.

Dr. Hanson, anticipating additional revenue in the state health fund after the next legislature, predicted co-operation with the Rosenwald fund, which he said was ready to match Florida money dollar for dollar in the proposed work if the state would provide a suitable negro clinic.

He took his audience through an interesting travelogue based upon his travels about Liberia and the African gold coast, in which he gathered material in the study of tropical diseases.

The convention was welcomed to Tampa by Mayor McKay.

Technical sessions in the morning and afternoon included the annual report of Dr. E. F. Aaron, president of the association, who explained the tremendous need over the state for hospital and clinical training of negro physicians and urged support of the clinical center established at Tallahassee, believing the city could be made a negro medical center equal to that of any in the country. His views were upheld by Dr. Hanson.

Jacksonville, Fla. Union
Thursday, Sept. 19, 1930

Health Fund Is Started For Work Among Negroes

A health campaign among negroes in an effort to reduce the tuberculosis death rate is being planned by the Tuberculosis Association of Duval County and in that connection a fund is being raised to handle the work, it was announced yesterday by Mrs. Florence Breed, executive secretary of the association. She said that "a friend of the local association, who wishes to remain unknown, has sent a check for \$50 as a nucleus of a fund to be used solely for health work among negroes." In that connection, Mrs. Breed declared that "the Tuberculosis Association will make every effort to increase this amount to the point where a worthwhile piece of health work can be attempted for them."

Health-1930

THE RURAL NEGRO'S NEED FOR MEDICAL ATTENTION

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"Whatever may have been its original stamina," the well known Southern author asserts, "the Negro race is now one peculiarly liable to disease. I believe that ethnology teaches that in the contacts of unequal races, the secondary race is peculiarly liable to succumb to those vices and those diseases against which the dominant race has, by slow inoculation, gradually fortified itself.

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In spite of the obvious need for medical and missionary work on the type so successfully conducted by Sir Wilfred Grenfell in Newfoundland, the writer believes that the South's anxiety to preserve white supremacy will make it extremely difficult to bring adequate medical assistance to the Negro.

"It is fitting to ask," Mr. Rutledge concludes, "does the South desire the welfare of the Negro? Speaking as a Southerner, who has lived for twenty-seven years in the North, I may say that such a question should not be answered categorically. It should be scanned. And probably we should define welfare. If it means the condition in which the Negro is happiest and the white man safest, the South religiously desires it. But if it means a movement toward social and political equality, tending at length toward rivalry and consequent bloodshed, the South does not desire it. At no cost is the South will-

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Infant Mortality Continues Higher

U. S. Public Health Service Studies Rates for Colored and White

WASHINGTON, D. C., March 17.—Negro infant mortality rates in every area studied were higher than the corresponding rates for white infants, according to information recently made available by the Public Health Service.

This difference was most marked in the urban areas of the South, while the Negro infant mortality rates among the rural districts of the South were nearer to those of the white infant mortality rates than in any other area, it was stated.

On the whole, infant mortality rates among the Negroes show trends similar to those shown by infant mortality death rates among the white populations of the same communities, it was pointed out. In two cities, Baltimore and Richmond, Negro infant mortality has declined more rapidly than that of the white population, it was shown.

The ratio of colored to white infant deaths is highest between the fifth and tenth months, it was stated, though there has been little improvement in the death rates from diseases of early infancy in either race.

These studies were carried on by the Public Health Service in urban and rural areas of a group of northern and southern States, in urban and rural Maryland, and in four cities, Richmond, Va.; Baltimore, Md.; Charleston, S. C. and New Orleans, La., it was stated.

LEADER

NEGRO RACE SUICIDE.

The negro population in this country used to multiply rapidly. Starting with 3,638,000 in 1850, it had risen to 10,463,000 by 1920. That is an average gain of about 1,000,000 a year for 70 years. The percentage of gain, however, has steadily decreased.

It is said by some observers that this slowing-down tendency is now becoming far more pronounced, especially in the north. In one of the big industrial cities the negro birth rate has dropped to equality with the white birth rate, or even a little lower. At the same time the negro death rate is said to have risen to twice our national death rate for all classes. When the heavy northern migration of southern negroes in recent years is considered, the importance of this change is apparent.

The whites used to fear that the prolific colored population would eventually outnumber them. A physician who has studied the question lately declares that "barring some miracle, the negro will be as scarce as the American Indian after a while."

The low birth rate and high death rate are attributed largely to the unhealthy conditions in negro quarters in industrial communities. Industry seems to be destroying the colored race.

Negro Lecturer
In order to stimulate interest in childhood tuberculosis in Negro colleges and colored schools during the Early Diagnosis Campaign, Dr. Algernon B. Jackson of Washington, D. C., a distinguished Negro physician, a successful practitioner of medicine, and a professor of bacteriology and preventive medicine at Howard University, is making a tour throughout South Carolina, North Carolina, Virginia, and West Virginia. Dr. Jackson who is a forceful speaker, will discuss in lay language essential facts about tuberculosis, especially as it involves the Negro. He will explain what the childhood type of tuberculosis is, how it develops, how it may be discovered, and what may be done to prevent this type from becoming the more serious or adult type of the disease. The National Tuberculosis Association has made this lecture tour possible through paying the expenses of Dr. Jackson and the state associations have worked out the itineraries, the publicity, and other arrangements.

General

APR 10 1930

LIMA, O.

STAR

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COLUMBIA, S. C.

STATE

APR 6 - 1930

Southern Negro Wants a Grenfell.

Archibald Rutledge, the well-known nature-writer of this State, familiar and sympathetic with its hinterlands not to have at least one snugly encle in the Outlook for April 2—which the Outlook, of New York, "plays up," to the remote hospital or medical not altogether because of the author. Those who have no cars stand, thor—with the title: "Wanted: a as we say, a slim chance of swift and Grenfell." We may suppose that this skilled, or of any, medical care. As was about the title chosen by the Cleveland said, it is a condition, and writer, and that the magazine editor, not a theory.

Or it may have been the other way about; it doesn't greatly matter. But the reader will hardly fail to catch the idea, which is—as Mr. Rutledge clearly says and repeats, that the ill or injured Negro in the rural

districts of the South has a slim chance.

Which is pretty much true also as to the ill or injured white person. The Southern hinterlands are sparsely settled—still more sparsely provided with surgeons and physicians and hospitals. Persons who own automobiles—and who so poor as and their dark denizens, has an art-sconced under a mortgage?—may rush black or white, sick or mutil, to the remote hospital or medical man. Those who have no cars stand, thor—with the title: "Wanted: a as we say, a slim chance of swift and Grenfell." We may suppose that this skilled, or of any, medical care. As was about the title chosen by the Cleveland said, it is a condition, and writer, and that the magazine editor, not a theory.

It would demand the labors of many Grenfells to care for the ill and injured throughout the hinterlands—South and North and West. Our hinterlands are vast and their peoples widely dispersed. But any Grenfell—any humble son of Asklepius—would be a welcome mission-

try and helper, whether he infiltrates from the North, or merely walks in from a neighboring State or county. There are not many Grenfells, anywhere, so far as we have observed; but almost any spot touched by the bruised heel of man, or on which lies tired, stricken, dying man, needs a Grenfell sorely.

We are not made particularly happy, however, to read things like these.

"A truly beneficial missionary penetration of the South by the North"—as if the Southern Negro may look only to the North, whence cometh his help; and as if the South has not also its medical missionaries ready for this splendid adventure.

"Does the South desire the welfare of the Negro?"—with its vaguely qualified consideration, and its unnecessary, and we think wholly unjustified answer—"At no cost is the South willing to jeopard the integrity of white civilization." That reply is antiquated; it no longer answers the challenge. The South does not envisage, in this work, any jeopardy to "White civilization."

"Will your (the Northern philanthropists and missionaries) gracious charity bear the bitter fruit of a graver racial problem?" Mr. Rutledge—says, in another paragraph, that he does not appreciate "Virginia's sending a missionary to China, and Carolina's sending one to India. As far as dire human extremity is concerned, we have Chinas and Indias all over the South." Why might not Northern and Southern missionaries move together among and heal the sick Negroes of the South, as well as the ill pariahs and untouchables of India and China, without intensifying race problems and hatreds? We do not think such a question should be flung, like a firebrand, among the straw and tinder of people who are ill in more than in their bodies.

"There is, I think," says Mr. Rutledge, "no lovelier land than the old plantation regions of the Carolinas... But on this beauty a blight is set. I feel it whenever I am at home. Here thousands of humble black peasants come into the world, live, are afflicted, and die—completely beyond the splendid consoling pale of modern medicine. Here Peter Small and Willie Fraser and Annie Gaillard lie down and die; and thousands like them are destined so to perish miserably for want of great sacrificial souls to minister to their bodies."

There lives and labors not so far from Mr. Rutledge's home plantation, in "the picturesque wilds of the Santee, in the hinterlands northeast

of Charleston," a man as worthy, if not having the transcendent opportunities of the magnificent martyr Grenfell, a physician who spends all—life and treasure—in his service for the poor and needy and ill. He must know of Dr. Joshua Ward Flagg, of Murrells Inlet, the pathway to whose door, trodden by white and black, is as the aisle of a church or temple. The immense worth of his labors is incalculable—imponderable unless in the scales of eternal wisdom and justice and love.

We think that Mr. Rutledge cherishes too many fears about the sensitiveness of white Southerners. He writes, reiterating this oft-expressed apprehension:

Because of the sensitiveness of the South over the race question, Grenfells from the North will have, unless they are gifted in the delicate arts of human diplomacy and strategy, a far more difficult task than that which first confronted Sir Wilfred amid the icebergs. It would be unfair not to warn them that they will encounter prejudice, of a kind to be met only by candor and the spirit of kindly adjustment.

All "Grenfells" will, we are sure, be heartily welcomed, and remain secure in the crust of their own prejudices as to race and culture. We have ceased asking—even if we once asked if they come from Massachusetts or Labrador or Grundy's Pennsylvania. The Negro of the hinterlands Mr. Rutledge describes is the victim of many diseases and ills that education and clean living would help the Grenfells to heal. Many are ill and dying because of ignorance blacker than their skins and superstitions darker than both. There are needed in these hinterlands of ours—throughout the States—cleansers and healers besides the Grenfells. That need touches but one of many dark and ulcerous spots. But why turn the problem into a question as to race prejudices and race fears?

WARNS OF IMPORTANCE OF NEW U. S. BILL TO NEGRO

WASHINGTON, Apr. 17—(CNS)—The unavailability of funds, known as the Sheppard-Towner Fund, appropriated by the Federal government to the Children's Bureau, specifically for care of mothers and babies, greatly endangers the welfare of colored mothers and children, according to Mrs. Florence Kelley, member of the board of directors of the National Association for the Advancement of Colored People.

"Hon. Godfrey Godwin of Minnesota, introduced a bill in the House

of Representatives to re-navigate the law as it was before June 30," writes Mrs. Kelley. "It provides that \$1,240,000 shall be appropriated every year for seven years from 1933 to 1937. To be matched by the States, a fund used by the health authority of each State under the guidance of the Children's Bureau. This will, if enacted restore the Sheppard Towner Funds under a new name. The bill is in the House Committee on Interstate and Foreign Commerce.

"It is late in the session and there is no time to be lost. Every one who reads this should write at once to his representative in Congress, urging enactment of this measure."

AVERAGE LIFE OF NEGROES NOW FORTY-SIX YEARS

Death Rate Steadily Declining but Still too High

TUBERCULOSIS TAKES HEAVY TOLL

Atlanta, Ga., May—Instead of dying out, as was at one time predicted, the Negro race in America is steadily growing more healthy and the life span of Negroes is increasing, according to a statement given out by the Commission on Interracial Cooperation. Basing its statements upon figures furnished by the United States Public Health Service and the Statistical Department of the Metropolitan Life Insurance Company, the Commission says:

"The gloomy prophecies of those who expected the solution of the American Negro problem through the Negro's extinction have been completely discredited by the experience of the last sixty years. In that period the Negro mortality rate has decreased fifty per cent or more the present death rate being about 17 per thousand, as against 35 or 40 per thousand in Reconstruction days."

"The present life span of Negroes is about 46 years, which represents a gain in the last decade of approximately five years. Both in mortality rate and life expectancy the Negro today stands about where the white American stood thirty years

ago—by no means a bad showing in the light of the well-known background disadvantages under which the Negro's progress has been made. "A study of the two million policyholders of the Metropolitan Life Insurance Company reveals a mortality rate still lower, the figures for 1926 being 14.6 per thousand among this group as against 17.5 per thousand in 1911. Most gratifying has been the decreasing mortality from tuberculosis, which still causes the death of one Negro in every six. A decline of 44 per cent in the tuberculosis death rate between 1911 and 1926 and a decrease of 54.5 per cent in tuberculosis among Negro children in the same period indicates that this peculiarly destructive disease is rapidly yielding to the determined assaults that are being made upon it.

"With all the gains that have been made, however, due to education, sanitation, and public health service, the Negro death rate is still much higher than that of white people—87 per cent higher in the cities and 49 per cent higher in the rural communities, according to the figures of the Public Health Service.

"It will be a surprise to many to learn that the Negro death rate is much higher in the cities than in the rural districts, and higher in the northern states than in the South. In the census of 1920 Louisiana showed the lowest Negro mortality rate—13.5 per thousand—while seven other southern states showed rates of 17.2 or less. That of New York, on the other hand, was 17.6, while in other northern states the rate ran higher, reaching a maximum of 29.4 in Michigan."

COLUMBIA, S. C. STATE

JUN 2 - 1930

Negro Death Rate Declining.

Statistics compiled by the Interracial commission from figures of the United States public health service and the Metropolitan Life insurance company, show that, contrary to opinion among many, the Negro race is improving in health and its life span lengthening rapidly.

In the past sixty years the Negro death rate has decreased fifty per cent. or more (accurate statistics for the earliest period after the emancipation are not available) and now averages 17

per 1,000 as against 34 to 40 per 1,000 in 1870.

In the past decade the life span of Negroes has shown a five-year gain, and is now about 46. To add a half-year of life expectancy every year is a remarkable accomplishment.

Tuberculosis, it is well known, is among the leading causes of death among Negroes. Even here, much progress is being made. Deaths from this disease were cut 44 per cent. between 1911 and 1926; and a campaign of prevention among Negro school

children has lowered the tuberculosis death rate among them more than 54 per cent. in the same period. Certain cities, notably Chicago, Birmingham, Philadelphia, Detroit, New York, have done splendid work in reducing the mortality among their crowded Negro population from this dread disease. That there is, however, still much room for improvement, in health conditions among Negroes is shown by the fact that their death rate is 87 per cent higher in cities and towns and 49 per cent. higher in rural communities than the white death rate. With the Negroes apparently continuing their migration city-ward, this disproportionate urban mortality among them creates a grave health problem to their race and also to the whites thrown by congestion in living and working conditions in very close contact with them.

The Negroes constitute about one-tenth of the population. In certain sections they are in a much larger percentage. Problems, therefore, affecting their health and mortality, have a very direct bearing on the welfare of the whole population; and for economic and social almost as much as for humanitarian reasons, demand the best thought and earnest attention of health authorities and of citizens in general.

Health - 1930

Fewer Die; Fewer Born

IT MUST HAVE BEEN A SAD DAY in germ land, it is remarked, when the news came that the United States had cut its death-rate in half since 1900.

Monsieur Mierob isn't the busy—and successful—worker that he used to be, it seems, not by a great deal. His batting average has slumped dreadfully. We read in the report of the joint committee on health problems of the American Medical Association and the National Educational Association.

In the typhoid league, for instance, where this gentleman used to be a star performer, his death score has been slashed by 95 per cent. And in those other games that he loves to play, diphtheria and paratyphoid, he has suffered identical setbacks.

As the country rejoices over the winning battle being fought by medical science against him and his tribe, another phase of vital statistics bobs up in the news to disquiet some editors. This is the decline in the national birth-rate, as revealed by the Vital Statistics Division of the Department of Commerce. Last year 78,063 fewer children were born than in 1928. With three States excluded from the calculation, this indicates a decline of 3.6 per cent. in the national birth-rate for 1928-1929, we read.

Disquieting this may be, but a reading of a digest of the health report leaves the impression that a child born to-day has far better prospects of long life and good health than ever before.

ONE of the outstanding features of the report is the reduction in the general death-rate of the nation, from 20 and 30 per 1,000 of population prior to 1900, to 12 per 1,000 in 1928. Twenty years have been added to the average expectancy of life in this country in the last seventy-five years, we read.

Pointing to the great reduction in the infant mortality rate, the report says that in 1900 sixteen babies of every 100 died in their first year, but the rate to-day is only seven per 100.

Since 1900 the death-rate for typhoid and paratyphoid has been cut from 34 per 100,000 to 4.9 per 100,000 in 1928 and the death-rate from tuberculosis from 194 to 79. "Some scourges, such as yellow fever, have virtually been wiped out," notes the New York Herald Tribune, and it continues:

"The progress made in vaccination for diphtheria and typhoid is given as the principal reason for the decrease in the death-rates from those diseases, with the increase in sanitary precautions taken concerning drinking water and milk as strong contributory factors in the case of typhoid and paratyphoid.

"In spite of the winning campaign conducted against so many diseases, the cost of disease and death in the United States is said still to be tremendous.

"Tuberculosis, heart disease, and physical handicaps cost the taxpayers \$927,000,000 annually, \$800,000,000 going to fight tuberculosis, \$90,000,000 for victims of heart disease, and \$37,000,000 for the relief of those handicapped physically.

REVERTING to the declining birth-rate, the United Press tells us that Dr. T. F. Murphy, chief statistician of the Vital Statistics Division of the Commerce Department, believes that this "is the price of modern social standards which move Americans to settle in cities, to share, man and wife alike, in the rigors of earning a living, and to practise the principles of birth control."

Continuing:

"To no one of these factors, nor to all combined, however, would Dr. Murphy attribute the declining birth-rate which last year alone reduced the number of babies born in every 1,000 of population from 19.7 in 1928 to 19.

"The cause underlying the surprising trend is much more complex and due to a combination of factors so involved as to become almost impossible to interpret, he believes.

"He thinks that America's restrictive immigration laws are in a large measure responsible, citing statistics to show that the birth-rate has always been higher among the immigrant class, the foreign-born population."

Excerpts from two editorials will serve to show the tenor of comment on our reduced birth-rate, some editors feeling a bit perturbed about it; others, not at all. First, the Jackson News:

"If an average of 3.2 children is necessary for national safety and our average is already down to 2.5, it is easy to foresee not only a stationary population a generation hence but an ominously declining population in a century."

THEN let us turn to the Buffalo Courier-Express:

"It is to be presumed that these figures will cause a lot of lamentation among those persons who seem to think that national salvation depends on the number of babies born and not on what becomes of them.

"But we think it is a lot more important that the babies that are born shall have the surroundings and the care that will assure them a chance for life in a rather tough old world.

"Babies that are born without this assurance represent just a waste of nature's life processes."

NEW YORK SUN

JUL 30 1930 MORTALITY RATE AT LOWEST MARK

Life Insurance Bulletin Gives First Half Year Figures.

The lowest mortality rate for the first half of any year has been recorded among the wage earning populations of the United States and Canada during the winter and spring of 1930, according to a statistical bulletin issued by the Metropolitan Life today. The data is obtained from an analysis made by the Metropolitan of its 19,000,000 industrial policyholders.

The bulletin stated that "the white population of the United States has enjoyed better health than ever before, and with the exception of only one prior year, the death rate of the colored people has never been so low."

An almost ten per cent. reduction in the tuberculosis death rate was recorded in the first half of this year,

General

FINE RESULTS NOTED IN NEW HEALTH MOVE

11-22-30

Using Practical Measures To Control Syphilis In The South

CHICAGO, Ill. (AP)—Considerable interest has been shown in and importance attached to the program being conducted in six southern states for the care and control of syphilis by the United States Public Health Service with the cooperation of the Rosenwald Fund.

The report from Mississippi, which was the first state in which the work was carried on, showed that state and county health officers, the large employers of labor and Negroes have each made sacrifices to insure the success of the demonstration and to prove that the difficulties in securing adequate treatment for syphilis, among Negroes, can be overcome provided public authorities are interested and funds are available. That the Negro workers were interested in this important public health question was indicated in the large number of individuals who returned for succeeding treatments.

The program was launched when it was realized that the actual facts on the prevalence of syphilis were scant. An opinion expressed by Dr. Paul S. Sarey, member of the Field Staff International Health Division of the Rockefeller Foundation, who has studied the problem, was "The prevalence of syphilis in apparently healthy Negroes is a subject on which there is little precise information. Estimates as to the infection rate in this race vary widely. No large series of accurately studied cases has been reported."

The opinion was confirmed by other health authorities and six southern areas, including Mississippi, Alabama, Georgia, Tennessee, and North Carolina, were selected for the experiment. Opportunities for blood tests for syphilis were offered to the population and facilities for good medical treatment furnished for at least one year. Careful records will be kept. It is estimated that the cost of the experiment will be more than \$100,000 of which half will be contributed by the Rosenwald Fund and half by states and localities in which the work is carried on.

The United Public Health Service is directing the experiment in cooperation with the State Department of Health of the states concerned and the officers of the counties selected as demonstration areas. The Assistant Surgeon General of the United States Public Health Service, Taliaferro Clark who is also Consultant on Negro Health for the Rosenwald Fund, and by Dr. C. C. Wenger, director of the

Venereal Disease Clinics operated by the United States Government at Hot Springs, Arkansas, are associated with the studies.

One of the most significant features of the work in Alabama is the employment of a Negro physician and registered nurse, as members of the staff of the county health unit. This unit is under the direction of Dr. Eugene Miller, a white native of Alabama, and his assistant is Dr. A. C. Davis, a prominent physician. Commenting upon Dr. Davis' work, Dr. Miller said:

"We have been much gratified and pleased with the results obtained by Dr. Davis, and the plan is for him to attend the Government Clinic. I am glad he will have this opportunity to go there for observation and further training, and I am sure that his services will be of larger value to his people and to the county and state."

The Hot Springs Clinic is conducted annually and during the past years, according to reports, a large number of Negro physicians have availed themselves of the opportunities offered. It is hoped and believed that a larger number will attend this year, especially from southern states.

BRYAN, TEX
EAGLE

AUG 28 1929

EDITORIAL OF THE DAY

BIRTH RATE AND DEATH RATE

The bare statement that recent reports of the Census Bureau indicate that both the death rate and the birth rate in the United States are steadily falling has been widely published, without, however, any revelation of the many factors contributing to this statement which make it significant in a variety of directions.

In continental United States (exclusive of Texas, South Dakota, Utah, New Mexico and Nevada, which fall short of requirements in reporting vital statistics) there were 2,142,124 births in 1929. In 1928 the number of births in this area was 2,220,187—over 78,000 more. This absolute decrease in births amounted to 3 1-2 per cent during the year. However, since the population is estimated to have increased over 1 per cent during the year, the actual annual decrease in the birth rate was around 5 per cent. At the same time, the number of deaths in this territory during the two years was almost exactly the same—1,336,882 in 1929 and 1,353,878 in 1929. The increase in population means that these figures show an actual decrease in the actual death rate.

The death rate in 65 of the largest cities in the United States in the first 25 weeks of 1930 was almost 8 per cent lower than in the same period in 1929. Since the expectancy of life has changed very little for the average person of middle age, the decrease in the death rate in recent years has come about chiefly through better protection of infant and child health.

In 1910 the birth rate in cities with accurate vital statistics was almost 30 per 1,000 inhabitants, whereas today it has fallen below 20 per 1,000. Hence it is not surprising to find that in 1915 the excess of births over deaths was 10.9 per 1,000. In 1928 it had fallen to 7.7 per 1,000.

The latest detailed government figures on the birth rate and the death rate are for 1927. In that year the birth rate per 1,000 for whites was 19.4 and for negroes 26.2. However, in six of the

Health - 1930

WATERBURY, CONN.
REPUBLICAN

General

DEC 15 1930

The Sheppard-Towner Act

WHEN Sen. Bingham on Tuesday assailed the Jones bill to extend the Sheppard-Towner maternal and child-welfare federal aid act, he spoke, he said, for the state of Connecticut. It is true that Connecticut did not lend official countenance to this act before it lapsed by taking advantage of the aid it offered for reducing the maternal and infant death rates. These death rates might have been reduced more rapidly than they have been if the state were not a trifle hipped on the subject of federal aid and had accepted the act. But it did not, and in this sense Sen. Bingham did speak for Connecticut.

He did not, however, speak for thousands of intelligent Connecticut citizens whose horizons are not bounded by the state lines. They know that there are vast areas of this country that urgently need all the aid they can obtain to help them reduce their appalling death rates of mothers and infants. Thickly settled and prosperous Connecticut with its accessible hospital service, its good roads and its own comparatively effective health services, may be able to get along without this aid. But what of the sparsely settled and far flung areas of agricultural western and southern states the latter with the immense complication presented by the Negro population? These areas—and some that are more thickly settled, too—are responsible for a maternity death rate in the United States higher than in any other of the civilized nations.

Sen. Bingham's doctrinaire devotion to states rights was not shared by the hundreds of experts that gathered from all over the country last month for the White House conference on child health and protection. The conference endorsed the Sheppard-Towner act, through a resolution adopted by Section IV, because the result of the act "was an excellent beginning of the building up of services in the various states, and through the states, in many localities, for the protection of mothers and infants, largely by educational methods and activities—a beginning which should be fostered and encouraged until such services are everywhere available and until the mortality rates from child birth causes and that of infants are reduced to those existing in countries with standards of general well-being comparable to those existing in this country."

PREVENTABLE SICKNESS AND DEATH AMONG NEGROES COST MILLIONS

National "Health Week" Propaganda Should Aid In Reducing This Loss.

Washington, D. C.—Sometime ago Mr. R. H. Rutherford, President of the National Benefit Life Insurance Company, located here at the National Capital, called attention to certain actuarial figures which indicated that the needless business loss of the country in adult deaths amounts to about Three Billion (\$3,000,000,000) Dollars annually.

More specifically, he called attention to the exceedingly high and needless death rate among the colored population of the country, and indicated not only the high ratio of preventable deaths, but also the annual economic loss to the race in sickness and death amounting to, approximately, \$300,000,00 a year in the South alone, not counting the rest of the country. Undoubtedly, if the country as a whole is considered, the losses of the Negro because of sickness and preventable deaths must each close to \$500,000,00 a year.

Recurring to this discussion, Mr. Rutherford this week referred to the fact that National Negro Health Week, through its propaganda agencies, has a golden opportunity to call these alarming figures to the attention of our people more effectively than ever before, because of the heightened interest of the masses in this subject of public health.

Because life insurance has now come to be reckoned as a form of thrift, and because thrift promotes economic independence, and seeks to do away with all barriers, National Benefit and other life insurance companies are adopting for 1930 and succeeding years, the slogan, "Health and Thrift"—handmaidens of progress and prosperity.

Life insurance, undoubtedly, in

the future will be regarded as the cornerstone of thrift. It is now the largest organized factor against the terror of poverty which death has heretofore brought in its wake. The saving protection in this crisis which all of us must face is "Life Insurance," which has been referred to by a New York Life Insurance executive as "the most important beneficial enterprise in the manifold problem of living," because it banishes Charity and enthrones Self-Respect, Protection for our loved ones, and Self-Protection for ourselves.

LIFE IS AS SHORT AS EVER

REPORTS THAT THE SPAN OF HUMAN LIFE has been lengthened of late years are unfounded, according to Dr. Louis F. Dublin, statistician of the Metropolitan Life Insurance Company of New York. In an address before the American Public Health Association, reported in the company's *Statistical Bulletin* (New York), Dr. Dublin asserted that, in the face of extraordinary improvements in public

health practise and in the field of medicine within the last century, nothing has happened to encourage the hope that the span of life might be lengthened. He said:

"There has been some confusion in the past in the use of the expression 'span of life.' It is not always clearly understood that there can be marked improvement in the expectation of life or the mean length of life, in spite of the fact that the span of life has, so far as we know, changed little or not at all since remote antiquity. The matter is really very simple: People do not live to more ex-

treme old age than they used to; but a greater proportion of them live to relatively advanced ages, thus pulling up the average. In particular, very many more now pass through the dangers of infant mortality than was the case even so recently as the beginning of the present century. Thus the mean length of life is much greater than formerly, tho the upper limit of life—a few years past the century mark—is just as inexorable to-day as it was a hundred or a thousand years ago. And the number of persons who reach the venerable age of one hundred years is certainly very small. There are about 5,000 persons in this country who claim this distinction, but it is probable that in many cases their claim is based on an error, and, possibly, here and there, on a pardonable pride that induces them to indulge in a little poetic license. *Vol. 104, No. 1.*

"That twenty years have been added to the average length of human life since public health work began to be actively practised in the early 'eighties of the last century is true. But this gain can be traced to the reduced mortality of infants and to the cutting down of the unnecessary and preventable deaths of young people from typhoid fever, diphtheria, scarlet-fever, smallpox, and a number of other diseases which, for the most part, affect persons under forty years of age. The situation is very different in the case of certain diseases typical of that period when the wear and tear of life begin to tell. Prominent among these are heart disease and cancer. It is unfortunately a fact that, especially since about 1921, the death-rates from these diseases have been definitely on the increase (especially among males) past mid-life.

"Another disease—less important numerically—which has shown the same upward trend for persons past mid-life, is diabetes. In this case, among white males, there is a definite contrast between the younger and the older age groups, for between the ages of thirty-five and forty-four, the trend has been distinctly downward. The upward trend for diabetes is curiously accentuated among colored females.

"That there has also been an upward trend in the death-rate from accidents, and also from suicide, in the upper registers of life will surprise no one who has followed the current course of events. The cause of this upward movement, is, however,

essentially external, as compared with the mainly internal character of the causes underlying the rise in mortality from degenerative diseases. Incidentally, it is to be noted that not all degenerative diseases show observable increase in mortality. Cerebral hemorrhage and chronic nephritis show a decrease rather than an increase, at any rate among white persons."

TIMES

FEB 9 1930

FINDS 'EMANATION' FROM HUMAN BODY

British Doctor Says Substance
Resembling Tobacco Smoke
Envelops Persons.

NOT AURA OR ECTOPLASM

Dr. Drysdale Anderson Tells of
Research by London Group to
Explain Phenomenon.

Dr. Drysdale Anderson, English officer of health on the West African medical staff, who arrived here last week to investigate certain problems in malaria and tuberculosis, told of research into an "emanation" from the human body resembling tobacco smoke which is visible under certain scientific conditions.

With several London medical men, Dr. Anderson said, he was experimenting with this "emanation" and the results will be published as soon as the research is concluded. He described it as a substance resembling tobacco smoke, which envelops the body and streams out of the tips of the fingers like white elastic bands. "I do not wish this matter of 'emanation' to be mixed up with the so-called aura and ectoplasm of spiritualism," said Dr. Anderson, who was seen at the Hotel Pennsylvania, just before leaving for Atlanta, Ga., to be the guest of Dr. George Brown, who is doing anti-tuberculosis work. "It is a scientific thing, not guesswork, and founded on scientific observation and not on theory.

"Dr. Kilmer, who was medical electrician at St. Thomas's Hospital in London, was the first to discover this 'emanation' from the human body, about twenty years ago. Nothing came of his work, however, because of his extraordinary assertions in connection with his discovery, which no one could verify. "Quite by accident I became interested in the subject, and last

August, in London, I repeated some of Dr. Kilmer's experiments. Much to my surprise, I found there was an 'emanation' from the body, which under certain conditions was plainly visible. I experimented with my friends and they saw the same thing I did. It was no hallucination.

"The fundamental idea is to discover what it is. We have been able to prove that it exists and can show it to anybody. In fact, I showed it to the captain of the steamer Minnekahda on my way here. A man can strip down to his waist, and under certain conditions he appears to be enveloped in what looks like solid tobacco smoke. I don't pretend to say it belongs to the spiritual. To the scientific mind it must have a natural explanation."

Plans Tubercular Research.

Dr. Anderson brought with him, from the Pasteur Institute in Paris, several living tuberculosis microbes, which he has taken South for experimental purposes. During his stay in the South he plans to study how tuberculosis affects the American negro after living in contact with civilization for over 200 years. He said he expected to find them almost as resistant to the disease as the white man. In the backwoods of Africa, he said, among the uncivilized natives, tuberculosis was on the increase and becoming very serious.

Dr. Anderson described his trip to America and his investigation of malaria and tuberculosis as a short holiday. He was accompanied here by his wife, who is a trained nurse. He will go to Nigeria in March, sailing from New York on Feb. 22, to continue his work.

For the last three years he has been in service in Mauritius, formerly Isle de France, in the Indian Ocean, about 530 miles east of Madagascar, as tuberculosis officer. He arrived when the disease was sweeping among the natives with a heavy death toll. A hospital with seventy beds was opened in Port Louis, and he was in charge of the propaganda work among the natives, in the sugar cane plantations, giving open-air talks on prevention, illustrated by motion pictures, the projection machine being attached to an automobile.

Toll Among Natives Heavy.

"The uncivilized natives in Mauritius die quickly from tuberculosis," said Dr. Anderson. "They die within three months. A civilized native contracts the disease when he is older and it takes him several years to die. In South Africa, where natives have been in contact with civilization for thirty years, they also are more resistant. Negroes in contact with civilization for 150 years have become largely resistant to the disease."

"Among the uncivilized races there is no tuberculosis in the dust, or in home conditions, such as exists among civilized people all over the world, so the baby of the uncivilized does not get its protecting attack. As a result, when it contracts the disease late in life it dies quickly."

Dr. Anderson said galloping consumption in the French colonies around the Sahara Desert was on the increase, and this was also true in the African English colonies. He

spoke of the methods used in combating the disease, among them the use of Dr. Albert Calmette's anti-tuberculosis vaccine upon babies.

"The French assert that the work of Dr. Calmette of the Pasteur Institute will solve the situation," said Dr. Anderson, "and the figures they advance bear out their point. In England we are skeptical of the French figures in the reduction of mortality among newly born infants and believe the figures have not proved the point. However, we are carrying out extensive experiments ourselves, with the view of proving it one way or the other. If Dr. Calmette is right, then all babies can be protected from tuberculosis and the disease will become as rare as smallpox has become since vaccination."

Dr. Anderson is a member of the Royal College of Surgeons, the Royal College of Physicians, and has a London diploma in public health and also in tropical medicine and hygiene.

Aids in White House Conference Studies

The National Tuberculosis Association has been requested by the White House Conference to aid in its work by conducting two studies.

The first is a study of the practice concerning the medical examination of children entering industry.

A dozen cities in various states have been chosen and a careful analysis of all its phases. The group of about 500 men and women interested in the kind and results of these medical examinations will be made by members of the National Tuberculosis Association staff. For the medical part of the work the District of Columbia Tuberculosis Association has loaned the services of Dr. Viola R. Anderson, their Director of Child Health Education.

The second study is in regard to the need for preventorium care of children in the United States and the existing facilities for providing it.

BULLETIN

Nat'l Tuberculosis Association

FEB - 1930

E. D. C. Wheels Already Moving

Predictions for a successful Early Diagnosis Campaign have more than been confirmed by the orders now being filled by the supply department of the National office.

The first promise of outside co-operation has come from the Metropolitan Life Insurance Company, which again will tie up its full page April advertising with the campaign. Several associations have undertaken contact with Negro groups as the first step in the campaign, and North Carolina has secured the fullest cooperation from its Negro Agricultural and Technical College in a program of lectures that will run through the summer.

Extensive plans have been laid by the National office for publicity on a national scale. The first step has just been taken with the mailing of several stories and E. D. C. pamphlets to a specially selected list of trade journals throughout the country. Cuts to illustrate the stories also are available if editors wish them. Later in the campaign several special news stories will be sent out from this office.

Special attention will be given to the analysis of the best examples of preventorium facilities in various cities.

The field work for this latter study will be done by Mrs. E. R. Grant, a member of the Executive Committee of the District of Columbia Association.

The White House Conference was called last fall by President Hoover to study the welfare of children in various states. The group of about 500 men and women interested in child problems are at present making researches along all lines of child protection and will make their final report to the President in the fall of 1930.

Dr. Viola R. Anderson, their Director of Child Health Education.

The second study is in regard to the need for preventorium care of children in the United States and the existing facilities for providing it.

Insurance companies will be asked to cooperate as they have in the past, by distributing among their policy holders copies of the pamphlets to be used during the campaign, and steps have been taken to interest fraternal orders and other large groups. Dr. Kleinschmidt has been invited to speak on the campaign before the association of physicians of fraternal organizations of the U. S. in Chicago early in February.

A direct contribution to state publicity will be made by the compilation of a three part publicity manual, a special cartoon, several news features for local adaptation, some radio and luncheon talks for speakers, and three columns of special features in plate form. The film, "Tuberculosis, and how it may be avoided," is winning laudatory comment and has climbed rapidly to the pinnacle of success as the best film of its kind ever released. It was designed for junior high school students, but lends itself admirably to showings before parents and teachers. A teacher's guide has been prepared to accompany it.

Health - TQ30

Uncle Sam's Children Dying At Earlier Age Yearly, Unpublished Data Shows

NEW YORK, N. Y.—Notions of blissfully increasing longevity to the contrary notwithstanding, the chances of Uncle Sam's children attaining a ripe old age are less promising today than they were ten years ago. And a man's chances are slimmer than a woman's according to hitherto unpublished data from the files of the Federal Bureau, made public at the fifth anniversary meeting of the Board of Counsel of the Milbank Memorial fund.

The study from which these somewhat startling conclusions are drawn was undertaken recently by the Division of Research. The report was made by Dorothy G. Wiehl of the research staff.

The study shows less mortality in early life, notably among babies, and there have been fewer deaths from the more infectious diseases, thanks to the progressive efficiency of modern public health agencies. These two items have been factors in increasing the theoretical length of life, that is, expectancy of life at birth. But what has really happened, the figures show, is that death has taken and is taking an increasing toll among adults in the prime of life and middle age.

Eight Chief Causes

To eight causes are chargeable to 85 per cent of the deaths in this country after the age of thirty-five, the report states. These causes are tuberculosis, heart disease, cancer, diabetes, cerebral hemorrhage and apoplexy, pneumonia, nephritis and accidents. They may vary age in their importance at different ages, but each accounts for a heavy toll of mature adults each year.

In assembling their reports investigators for the fund subjected the deaths from these eight causes during the years of 1921 and 1927 to detailed analyses to determine their comparative onslaught upon men and women in cutting down expectancy of life after maturity. These particular years were chosen because they are acknowledged the best health years experienced in the United States.

It will be seen then that this is an analysis of what actually has happened. And the report of the fund is at variance with recorded or actual expectancy of life.

An analysis of theoretical life expectancy for 1975, based on census figures of the past, in an article called "A nation of Elders in the Making," by Warren S. Thompson and P. K. Whelpton of the Scripps Foundation for Research in Population Problems, published in the current American Mercury, implies that whereas, 16 per cent of the population, at the future date this proportion will have increased to 26 percent.

Change Is Noticed

"An increase in the proportion of elders might be checked by a rise in the death rate at the older ages," the

been pointed out, was an increase in mortality of about 280 per 100,000 population, though less than half the net increase for males at this age, is substantial."

article qualifies, "indeed, there is some evidence that such a change has been occurring of late. But, with increased attention being focused on preventive medicine and such disease of middle age as diabetes and cancer, it is improbable that these death rates will go enough higher to prevent the proportion of older people from rising."

Other biometrists and vital statisticians have reached much the same conclusions, apparently without taking into account the condition revealed by the Fund's study.

Miss Wiehl, in presenting the report said: "At every age the change is more favorable for females than for males and this is particularly true for the re-ages of middle life. In the age group rate for males in 1927 showed an increase of 12.5 per cent over the 1921 mortality, as against a decrease in the female death rate of 4 per cent compared with an increase of 2.5 per cent for females. Even at ages twenty-five to thirty-four, a more favorable source in the female death rate was observed in the theoretical length served.

"Between 1921 and 1927, in age group of sixty-five to seventy-four, the increase in deaths of men exceeded that of women by 320 per 100,000.

Women Live Longer

"The death toll for women exceeded the death toll for men in each of the cause studied except diabetes.

"Out of every 100,000 men aged thirty-five to fifty-four years in the population, 43 more died from heart disease alone in 1927 than in 1921; 30 more died from accidents, 21 more died from pneumonia, 9 more died from cancer, making a total of 103 more deaths in each 100,000 population from these four causes alone.

"For males aged, fifty-five increased loss of life is shown. From heart diseases, 319 more out of every 100,000 men of this age died in 1927 than in 1921; ninety more died from cancer, sixty-one from accidents, forty-two from chronic nephritis, thirty-three more from pneumonia and seventeen more from diabetes. The total net increase in loss of life was about 500 per each 100,000 of the male population at those ages.

"No such increase in details from these causes occurred among the female population. Among women aged thirty-five to fifty-four years, there were sixteen more deaths from heart disease, six more from accidents, five more from cancer and two more from nephritis, thirty from diabetes, and these increases were wholly offset by decreased mortality from other causes and the net effect was a saving of about 3 per cent 100,000 in the mortality for this age group.

Interesting Data

"Even for the age group, sixty-five to seventy-four years, with an increase of 182 deaths from heart diseases, seventy-three from cancer, thirty from nephritis, thirty from diabetes, and twenty-one from accidents for every 100,000 females, the increased loss of life was less than among males, with one exception of death from diabetes. The net effect from all causes as has

Health - 1930

Georgia

Tuesday, September 9, 1930

Suicide Among Negroes.

The suicide of a Negro in Macon will probably attract greater attention throughout the country than many an event of intrinsically greater importance.

It has long been noticed that self-destruction among members of the Negro race is exceedingly rare. Here in Georgia, within the past twelve months, let us say, there have been scores of suicides. But almost without exception these suicides have been among members of the white race.

Just why this should be so is a question which must be left to the learned, if even they can throw any light on it. The English formula in every case of suicide is that the rash act was committed in a moment of temporary insanity.

In a certain sense it is probably true that any man who takes his own life is momentarily unbalanced. We know that the Negro race is by no means free from insanity. On the contrary, the cases are frequent. The lower and middle classes of Negroes are especially given to deep emotionalism, generally with a religious tinge. They are subject to many of the diseases which affect the physical structure of the brain and produce insanity. The Negro spiritual is the characteristic expression of a deep melancholy which takes a strong hold upon all who hear it.

And yet in the ordinary walk of life the typical Negro is notably cheerful. He accepts misfortune and the hard conditions of life with resignation and a cheerful philosophy where a white man would be driven to despair. It must be that this constant hope for better things, this determination to make the best of life as he finds it, removes the Negro generally from the temptation of self-destruction to which the white man only too readily yields. The explanation offers a field of interesting study. At present we must content ourselves with a knowledge of the simple fact that the Negro, generally speaking, prefers to bear the ills he has than fly to those he knows not of.

Health - 1930

Georgia.

HEALTH EDUCATION WEEK.

It may sound frite that "health is better than wealth," but it is as true as gospel. Where is the profit of wrecking health to acquire a competency and then, in pain and distress spend it all on hospitals and hot springs?

servants, living in unsanitary conditions, both physical and moral, become perilous disease carriers. The health campaigns need to be carried to not only because they need it, but as a protective measure for the white homes of the state.

This health week should produce most profitable results to the general physical welfare.

Macon, Ga. News
Thursday, April 17, 1930

Rosenwald's Benefactions

The first of five clinics for the treatment of social diseases, authorized by the Rosenwald fund, will be erected in Brunswick at an early date, according to dispatches from that city. All the clinics will be under the supervision of the United States Public Health Service, but control and operation of the local clinic will be under the direction of the county health commissioner. The Rosenwald fund covers all cost of operation and provides a regular physician and trained nurse in attendance at all times.

Julius Rosenwald, whose money has made possible the establishment of these clinics, has been one of the most generous of all men in carrying the message to the American philanthropists and a large part of his benefactions has found its way to the South.

Mr. Rosenwald, as he explained in an interesting article several months ago in The Saturday Evening Post, does not believe in setting up an endowment fund, the proceeds of which would have to be devoted to some specified object for years to come. He feels that conditions change and that where one line of public welfare required assistance today and perhaps tomorrow, circumstances might change materially in a decade, for example, and other causes would be far worthier of support. It is his settled policy therefore to distribute during his own life time whatever funds he feels he wishes to give to charity and welfare work, knowing that only the worthiest and neediest causes will come in for support. Whether his theory be entirely valid or not it is certain that he has distributed his wealth with great wisdom and discretion and the world is better and brighter because he has lived.

And while white citizens are safeguarding their health interests they should not forget how much those conditions are menaced by the increasing disease afflictions of the colored people who serve them in so many intimate capacities. Their

Decatur, Ga. Daily News Era Athens, Ga. Banner-Herald
Thursday, April 24, 1930

GOOD WORK OF COLORED CLINIC

A WELFARE MOVEMENT IN
DeKALB WHICH HAS ACCOMPLISHED MUCH.

Perhaps few community welfare organizations are doing more effective work than the colored clinic which is held every Wednesday morning in the fraternity hall in the colored section.

The clinic receives and treats a large number of colored children and adults weekly and is forced to turn away a considerable number of applicants every week.

The clinic is operated by a committee composed of one woman from each church. Mrs. A. P. Griffin, of the First Baptist church, is president, Mrs. Hansford Sams, of the First Presbyterian church, is secretary, and Mrs. Homer Allen, First Methodist; Mrs. Gouge, Christian; Mrs. Matthews, Episcopal. Mrs. Hunter Blakely keeps the records and Mrs. Conway is employed as nurse. Dr. Homer Allen donates his professional services.

The clinic committee seeks to follow up the cases which pass through the clinic, but where 40 or 50 cases are handled weekly it is manifestly impossible for this work to be done as fully as desired by the limited number of workers now identified with the clinic. The great majority of cases are children, whose eyes, teeth and ears are examined and in many of these cases prescriptions are required to be filled and when the patient is unable to pay for this the committee has assumed the responsibility.

It sometimes happens that the money for these prescriptions is later returned by the patient but most of it is not and therefore, becomes a considerable burden on the members of the committee.

The promoters of the clinic are not making any appeal for financial or other aid but they would like for the public to know the character and extent of the work being done by the clinic in order that it may receive the consideration from the public it deserves. The clinic opens every Wednesday morning at 9:00 o'clock and a visit to it will be informing to any who feel interested in its work.

Health of Negro Farmer Discussed Before Meeting

MEMPHIS, Tenn.—(AP)—Constant sickness—not low production or unprofitable distribution of commodities—is the thing that keeps Negro farm workers in poverty, in the opinion of Professor T. N. Campbell of Tuskegee Institute.

Describing the operations of a "moveable School" to teach Negro farmers how to keep well, he told health workers attending the annual meeting of the National Tuberculosis Association today that he had found that the average Negro farm hand is more careless of the living conditions of his family than he is of his live-stock.

"He sees to it that the latter keep in condition to plow but he neglects members of his family who labor in the field" the Tuskegee man said.

Reports of research work prepared for consideration of the convention today included details of measuring the respiration rate of the tuberculosis germ. Accurate measurement of the breathing of the germs was shown to have an important bearing on the manner in which the disease is overcome in the bodies of persons who recover from it.

Dental Specialists Hold Negro Clinics

Prominent dental specialists took part in a series of clinics held during the week just past for local and community negro dentists, with demonstrations in the treatment of pyorrhea, instructions in plate work and other phases of oral hygiene. Among Atlanta dental experts who contributed their services were Dr. Robert L. Dement, Dr. Thomas Connor and Dr. J. H. Ellis, the latter a professor of pathology of Meharry college.

Infant Mortality Rate Here Third Highest in Nation

A mortality rate of 93.8 per 1,000 live births among infants less than one year old was reported for Atlanta in a summary of vital statistics for 1929 published by the federal bureau of census. The rate for Georgia was 77.2 per 1,000 births.

The rate is the third highest in the United States. Nashville, with a rate of 98.1, was highest, and Memphis, with 95.3, was second.

Dr. T. F. Abercrombie, head of the state health department, said that the high death rate among infants was due to three factors—a high influenza death rate in the early part of 1929 and the last of 1928; a decrease in the number of births, which makes the deaths show high by comparison, and a large death rate among negro infants.

Statistics of the state board of health for Atlanta show that the death rate among white infants under one year of age for 1929 was 77.2 per 1,000 live births, while among negroes it was 131 per 1,000.

Statistics of the state department differ slightly from those of the federal government, due possibly to differences in geographic area considered. The 1929 records of the state show 3,479 white and 1,736 negro live births in Atlanta in 1929. While the number of negro births was only half as large as the number of white births, 278 negro deaths were reported against 262 deaths of white infants under one year.

Altogether 57,729 births were reported in Georgia in 1929 and 57,123 in 1928. The total number of deaths in 1929 was 35,337, and in 1928 was 36,001. In 1929 the number of infant deaths was 4,455, and the number in 1928 was 4,882.

The state rate was substantially in keeping with the rate of other neighboring states. Alabama's rate was 73.5, North Carolina's was 79.1 and Mississippi's was 72.1.

The report showed 2,142,124 live births in the registration area of the United States in 1929, a decrease of 78,063, or 3.6 per cent, from the year before. Nevada, New Mexico and Utah were not included.

The number of deaths was 1,356,882, almost identical with the number in the same area the year before. The infant mortality rate for the area as a whole was 67.3, 1.5 lower than the rate of 68.8 established in 1928.

Healthcade Tourists Study Malaria Control Methods Used in Dougherty County

By RALPH SMITH
Journal Staff Correspondent

ALBANY, Ga., June 10.—Beginning with a visit to Sylvester, the second day of the first healthcade ever staged in Georgia got away to a fine start Tuesday morning, bringing up here at noon, in the midst of an inspection of the splendid progress that has been made by Dougherty County in the protection and promotion of public health, with the aid and cooperation of the State Board of Health.

Dr. M. E. Winchester, director of county health work for the State board, had opened the eyes of the tourists to the accomplishments of Worth County in the forenoon, so that the bigger things in Dougherty County came as a matter of course, albeit they are serving well to impress the scope and character of the work in which Georgia's health authorities are engaged.

Dougherty County has malaria and malaria-breeding mosquitoes on the run, so much that Lee Clarkson, the State Board's chief engineer, takes special pride in the "water dusting" program under way here. They are literally dusting the waters of countless ponds and lakes with Paris green, upon which mosquitoes feed fatally.

Luncheon at Cordele

The healthcade's first day included, in addition, to a trip by motor that brought the party to Albany for the night, interesting stops at Cordele and Americus. These served to keep the sight-seers busy, with a luncheon at Cordele. A buffet supper at Americus, and a visit to innumerable points of interest in and about both Cordele and Americus.

Some idea of the first day's activity will be gathered when it is understood that the Cordele stop included a visit to Crisp County's gigantic water power development, on the Flint River, about fifteen miles from town; a visit to the reforestation undertaking near Vienna, where State Forester B. M. Lufborrow explained a project involving the cultivation of a forest of slash pine trees; a visit to the Cordele water works plant; a visit to the Gillespie Negro School, where Dr. Guy Lunsford, commissioner of health, inoculated a lot of children with typhoid serum; visits to a couple of dairies near Cordele.

The program was hardly less strenuous at Americus. It included visits to Andersonville, some ten miles out. Andersonville National Cemetery, Andersonville Confederate Prison; Southern Aviation Field; Americus Normal College, where a health clinic was staged, Bryants pond and Thalean School.

Malaria Control Campaign
Dougherty County has under way

the most intense and unique county-wide malaria control campaign in the United States.

Due to Dougherty County's financial status which is excellent compared with other malarious counties, the Board of Health for many years attempted to persuade Dougherty County to make a demonstration of county-wide malaria control, believing that it would be a nucleus for the expansion of county-wide malaria control in southern Georgia.

Early in the year 1929 the efforts of the State Board of Health began to show material results when the people of Dougherty County and Albany demanded that something be done to control malaria in Dougherty County.

This public sentiment resulted in a co-operative plan between Dougherty County, the Georgia State Board of Health and the United States Public Health Service for demonstrating a county-wide mosquito eradication plan by use of paris green applied to all waters in the county which produce anopheles mosquitoes.

Upon the request of the County Board of Health the county commissioners levied a one mill tax yielding about \$17,000 annually for this purpose. The United States Public Health Service placed at Albany Dr. T. H. D. Griffiths, epidemiologist, to serve under both the direction and observation of results.

State Co-operates

The county employed an engineer as a field director for the work and the State Board of Health furnished assistance in preparing maps, selecting suitable equipment and in making field investigations.

The field director has under him three foremen. Each foreman has one-third of the county area and directs a crew of men who carry the mixture of paris green and hydrated lime in knapsack dusting machines and dust all of the smaller ponds in their respective division.

On all of the lakes and ponds too large for effective dusting with knapsack dusters a metal boat with a power duster is provided. This metal boat is equipped with a small generator which operates a blower which is furnished the dust from a large hopper placed in the boat. The boat is operated by an outboard motor. This boat equipment, as well as laborers with knapsack dusters, operated on all ponds, both large and small, in Dougherty County at ten-day intervals.

Before this work was started a blood index was made in Dougherty County to determine the percentage of malaria-infected school children. After one year's operation of this plan another blood index was taken, which determined approximately a 16 per cent reduction in malaria-infection from the same schools, so the

work has been very encouraging.

Power Company Lake

The Georgia Power Company maintains adjacent to the city limits of Albany a large lake covering about two thousand acres for the purpose of hydro-electric production.

Since this lake was constructed many years ago, it was not then subject to the Georgia State Board of Health's regulations of clearing of all vegetation before impounding the water and also the application of chemicals during the mosquito breeding season.

In spite of this, last year the State Board of Health obtained the cooperation of the power company for the protection of the life of the public in and around Albany. Even though it is very difficult to clear an area with the water in the lake the power company has lowered the water in the lake involving considerable expense due to loss of power and have a large force of men cutting all of the vegetation at low water mark. In addition to this they have placed boats on the lake with equipment for applying paris green to all portions of the lake subject to mosquito production.

This has been, without doubt, one of the major accomplishments of the State Board of Health for protection of a large population against malaria infection.

Augusta, Ga., Chronicle
Wednesday, June 18, 1930

NEGROES ARE KEPT WELL IN LOWNDES

**Valdosta Keeps Colored Areas
as Clean as Town's
Show Places**

Special to The Chronicle:

Valdosta, Ga., June 17.—These people down here take health work seriously—they're funny that way. They don't clean up just in the show places and leave the back of the town full of filth and disease. They clean that up, too. In fact, one speaker quoted former Senator Owens of Oklahoma, who told them in his broken English:

You must keep negro well, too, for if you don't negro make white man heap sick."

They believe that, these Lowndes county people. And the negro is well kept, for the city government of Valdosta keeps the negro sections as meticulously clean as it does the more showy places.

It's flat country hereabouts and the drainage problem is one of quite serious import, but they have solved it. They have cut an enormous drainage canal on one side of the town, over where they used to have flats and marshes. Laterals were cut out into marshes to drain into the canal. The canal takes it into a creek which skirts one side of the city and thence into the rivers and the sea.

Therefore, malaria is noted by its absence, for the Ellis health law unit,

headed by Dr. Gordon T. Crozier, county health commissioner, keeps atop the situation all the time. With Dr. Crozier to a man, is every member of the city and county government. They believe in him and his work. They realize they must have health for here they are educating the flower of Georgia youth in the Georgia State College for Women and Emory Junior college.

No serious illness has occurred in either of these institutions since their inception, although location of female college here by the state was opposed because the section was regarded as "unhealthy". Lowndes, however, has removed the "un" from the word as witnessed by the accomplishments of Dr. Crozier.

In 1929, the death rate of Lowndes county was 11.75 per 1,000 of population, as compared with the birth rate of 20.8 per 1,000 of population.

The death rate from tuberculosis decreased from 63.6 per 100,000 of population in 1928 to 38.6 in 1929.

The death rate from typhoid decreased from 28.3 per 100,000 of population in 1928 to 3.5 in 1929.

Not a death has occurred from diphtheria in Lowndes county in three years.

The infant mortality rate decreased from 68.6 per 1,000 births in 1929 to 42.2 in 1929.

And malaria is on the run.

In addition to such things as these which alone more than justify the small expenditure for a county health unit under the Ellis health law, Dr. Crozier maintains a rigid meat and milk and foodstuffs inspection, accounting for the small typhoid rate.

Sickness in Lowndes county is conspicuous for its absence.

Atlanta, Ga., Constitution
Saturday, September 27, 1930

Negro Health Rally Will Be Held Sunday

Jesse O. Thomas, field director of the Urban League, and Dr. D. D. Crawford, of the Atlanta Baptist Ministers' Union, will be the principal speakers Sunday afternoon at a mass meeting and rally designed to enlist the aid of Atlanta citizens in combating tuberculosis. The rally will be held at 2:30 o'clock at the Battle Hill Sanitarium, it was announced Friday by Geikie M. Smith, superintendent of the Battle Hill Sunday school.

According to Mr. Smith, there are 1,470 cases of tuberculosis now under observation among adult negroes and 338 among negro children. The death rate among negroes suffering from this disease is about three times greater than that among whites, Mr. Smith stated.

The Battle Hill Sunday school is now receiving contributions for the erection of a negro children's ward for the special treatment of tubercular cases. A large attendance at the mass meeting is expected.

Camilla, Ga., Enterprise
Friday, December 6, 1930

Health Exhibit At Colored School

Dr. C. O. Rainey, Mitchell County Health Commissioner, will put on a health exhibit at the School-Community Fair which will take place at Mitchell County Training School, Pelham, Georgia, Dec. 12th and 13th.

All Negroes are urged to see this exhibit and hear Dr. Rainey.

Health - 1930

Illinois.

CHICAGO, ILL.
HERALD-EXAMINER

JAN 7 1930

GIVE \$200,000 FOR NEGROES' HEALTH FUND

**Anonymous Pair Boost Total
to \$1,950,000; Project Aids
Race Peace, Says Rosenwald**

Two Chicagoans, who prefer to remain anonymous, have contributed \$100,000 each to the Provident Hospital-University of Chicago campaign for \$3,000,000 to provide a modern Negro medical center.

The gifts were announced yesterday at the campaign committee luncheon in the Palmer House.

This brings the total of the fund to \$1,950,000. Previously a million dollars had been received from the Rockefeller General Educational Board, \$500,000 from the Hubert Estate of New York City and \$250,000 from the Julius Rosenwald Fund.

ROSENWALD LAUDS DRIVE.

Mr. Rosenwald, discussing the need for better hospital facilities for Negroes, called the project "the greatest advance since the Emancipation Proclamation towards the promotion of friendlier relations between the races."

Dr. Frank Billings, chief of staff at the University of Chicago medical school and general chairman of the campaign, declared that "one and all of us should work for the realization of a Negro medical center in Chicago for purely selfish reasons if none other."

THE DEATH RATE HIGH

The Negro death rate in Chicago, he said, is 122 per cent greater than the white, twenty-six Negroes out of every thousand dying as compared to twelve out of every thousand white people.

Health Commissioner Arnold H.

Kegel, head of the physicians' division; Coroner Herman N. Bundesen, Mrs. Andrew MacLeish, women's division; Judge Hugo Friend, legal division; George Scott, steel division; Alexander L. Jackson, president of Provident Hospital, and Jacob Loeb, vice chairman of the executive committee of the organization, were other speakers.

CHICAGO, ILL.

TRIBUNE

APR 12 1930



(TRIBUNE Photo.)

COLORED BABIES COMPETE FOR PRIZES AT HEALTH CONTEST AT Y. M. C. A.

C. A. Left to right: Bertha Scott, 13 months old; William Shuford, 8 months old; James Reed, 12 months old, held by Nurse Florence Norton at Wabash avenue Y. M. C. A.

NATIONAL DAIRY COUNCIL PREPARES NEGRO POSTER

CHICAGO, Nov. 20.—The National Dairy Council, to appeal to Negro

mothers upon the importance of pure, wholesome milk upon the life and health of both children and adults, has been prepared by C. E. Dawson, prominent local colored artist, a poster entitled, "For Health and Achievement." It is desired thru the posters, which will be widely distributed, to stimulate a demand for proper food among 600,000 or more Race

families throughout the country. In the poster is the bust of a robust colored boy holding a bottle of milk, and to his left a large bottle of milk. A vision of Dr. R. R. Moton is painted in the background.

Health - 1930

Kansas.

WICHITA, KANS.

BEACON

APR 24 1930

FLYING SQUAD TO INSPECT CITY

Suggestions for Cleanup Will Be Made Following Motor Tour

Every block in the city will be visited and inspected between Thursday morning and next Monday evening by the special flying squadron of various civic organizations, working under the direction of the civic committee of the chamber of commerce, with the purpose of making a report on the general cleanliness and sanitary conditions of the city.

This flying squadron will make reports to the civic committee in view of suggesting betterment of city conditions as a part of the spring clean up campaign to be waged here next week. W. E. Marshall, chairman of the committee, will turn the reports over to City Manager Bert C. Wells for final action in suggesting betterment of conditions to property owners.

Organizations Represented

Twelve local civic organizations are represented in the flying squad. They are the fire prevention committee of the chamber of commerce; civic committee; Assyrian Club; Real Estate Board; Colored Federation of Women's Clubs; Fast Oracles; College Hill W. O. T. U.; Hypatia Club; Art and Progress Club; Women's Self Improvement Club; Federation of Women's Clubs.

Many active movements are already under way as a part of the campaign. In its garden projects drive, the Salvation Army has at present nearly 400 vacant lots under development. The Salvation Army has secured the permission of the owners for using the lots for this purpose, has turned them over to needy individuals, and is preparing the ground and furnishing seed for those who are unable to do so.

Wichita Boy Scouts, under the direction of R. E. Stimson, have 58 troops working to clean up alleys, yards and other unsightly spots in the city. Nine troops are working on individual landscape projects while seven are landscaping church

properties.

Negroes Are Aiding

The campaign thruout the county is being carried on by the home demonstration department of the Sedgwick County Farm Bureau.

Wichita Negroes, under the direction of Mrs. Fred Helm, president of the Colored Women's Federation of Clubs, Negro real estate men and the colored Y. M. C. A., are combining their efforts to clean up the North End.

The city health department has called attention to the fact that there are two large dumping grounds easily available from any part of the city. They are located at Thirteenth Street and the Big River, and at the Big River, five blocks south of the Maple Street bridge.

Health-1930

Louisiana.

STATES NEW ORLEANS, LA.

APR 18 1930 GIFTS RECEIVED IN HEALTH UNIT DRIVE

Money Already Pouring In as Campaign Gets Under Way

The program for the quarter-million-dollar campaign for a greater Flint-Goodridge Hospital and negro educational and health center was completed Thursday by the general committee headed by Dr. C. Jeff Miller, as chairman, and Ben C. Casanas, vice chairman. The campaign organization is completed and the machinery of solicitation is in motion. This was plainly indicated Thursday forenoon when Judge Rufus E. Foster, chairman of the big gifts' committee, made a return of \$16,190, representing the first official report of donations.

"This," said Vice Chairman Casanas, "shows that the people of New Orleans thoroughly appreciate the need of a modern hospital for the care of the sick of the negro population. It shows, too, that we realize the need of an educational and health center that will bring about a sanitary and generally better living condition among those of the opposite race. To my way of thinking, this is a matter of easy accomplishment."

"To begin with," continued Mr. Casanas, "our people of the city are called upon to subscribe but twelve and a half per cent of the total cost of the greater negro hospital and educational community. The remaining eighty-seven and one-half per cent of the building construction cost will be readily provided for by outside agencies. In other words, New Orleans is required to put up just \$250,000 while the outside agencies or influences will provide \$1,750,000 which would complete the \$2,000,000 budget for a center which will very materially reduce the city's mortality rate. The economic value of such a center should appeal strongly to the white and colored population of New Orleans. It is a matter of general interest to the community."

Mr. Casanas said further that "in doing this job, aside from the humanitarian point of view, we will be protecting our own interests." He said, too, there may be selfish aspects to the subject, but in the final the city, as a whole, and its entire population, will benefit through improved conditions that will result from a center such as is proposed by the committee headed by Dr. Miller.

Chairman Miller of the general organization said Thursday that a report of the advance special gifts committee will be made in the next few days. A report also will be made by Mrs. Paul H. Saunders, chairman of the white women's division in this campaign. Both branches of the organization have been thoroughly organized and are functioning to full capacity.

Dr. L. T. Burbridge, chairman of the colored big gifts committee, announced that subscriptions to the amount of \$8000 have already been secured by the negro division. The members of the several teams comprising the division are to meet Tuesday night of next week in the Pythian Temple. The dinner-meeting will be for the purpose of receiving additional financial reports.

A NEGRO HEALTH CENTER

New Orleans is undertaking a huge and commendable project that is certain to result in much good. It is to establish a \$2,000,000 health and educational center for Negroes. A day or two ago the successful completion of a local campaign to raise \$250,000 for the project was announced. That amount was needed to complete the \$2,000,000 required.

To the quarter of a million dollars raised in New Orleans will be added \$1,750,000 allotted by four national organizations and conditioned upon the local contributions. The money thus made available will be used to provide a modern hospital for Negroes, with a training school for Negro nurses, and this institution will serve also as a general "health center" for the Negro citizens of New Orleans, providing instruction in hygiene and healthful living. The project in addition, according to The Times-Picayune, includes the establishment of a university through the merger of two existing colleges for Negroes. Thus it will be a combined health center and educational center.

"The better hospital and health training facilities thus made available for its Negro population," says The Times-Picayune, "should improve health conditions for the city entire. These benefits are recognized by both races and the project, bearing the endorsement of both, will operate additionally to improve inter-racial relations. It should be noted that the Negro citizens of New Orleans have given the campaign enthusiastic support, their contribution to its success winning honorable mention from the campaign leaders. The latter and their working associates deserve the thanks and congratulations of the community upon their noteworthy

fine and successful labors in this cause."

This great institution that is to be established in New Orleans attests to the growing interest that the South is taking in the promotion of the welfare of the Negroes. All activities directed along these lines will be productive of important benefits to both races.

TRIBUNE NEW ORLEANS, LA.

JUN 8 1930 HEALTH OF NEGRO TO BE DISCUSSED

A discussion of the causes and cure of the present high death rate among negroes will be the object of the second annual session of the health conference sponsored by the Gulfside Association at Waveland, Miss, June 10 and 11. Prominent social and medical workers from all over the country and those representing the some 900,000 negroes of Mississippi and adjacent territory will lead the discussions. Among the speakers there will be Dr. Taliaferro Clark, assistant surgeon general of the national Bureau of Public Health, Bishop R. E. Jones, of New Orleans; Dr. A. W. Dumas, of Natchez, Mississippi and others.

The Most Virulent Germ Escaped Dr. Welch

Dr. William Henry Welch, white, honored at 80 last week for his services as one of the founder of Johns Hopkins Medical School and also as the "father" of modern medicine as we know it, became famous during the war for the discovery of the Welch bacillus — the gas producing organism causing gas gangrene, which attacked many a wounded soldier.

The story is told of the Johns Hopkins University trustees canvassing Germany in 1883 looking for a teacher of the then new pathological theory, that disease is caused by germs or microbes.

"Go get Welch," Hopkins trustees were told. "We have no one bigger."

And so Dr. Welch, who had studied under Koch, discoverer of the germ causing tuberculosis and also the germs causing anthrax and cholera; Pasteur, maker of many vaccines, and Ehrlich, discoverer of the salvarsan treatment for syphilis, came to Baltimore's Johns Hopkins Medical School.

With this background, it is not strange that out of Dr. Welch's laboratories have come physicians like Dr. Walter Reed, who risked his life in demonstrating that yellow fever is due to a germ carried by mosquitoes; Dr. Joseph C. Bloodgood, Dr. William S. Thayer, and Dr. Llewellyn Barker — names known in medical circles around the world.

Strange it is however, that with all the experience and experiments of Dr. Welch and his world-famous pupils with germs, none of them has discovered the microbe of race prejudice, and this is the more unusual, because there are more of these germs at Hopkins than at any other similar university in the country. To be sure, other Negro-hating medical schools exist in the South, but they haven't the wealth nor the intelligence of Hopkins.

Mr. Joseph Clarence Chambers graduated with honors from Douglass High School several years ago. A few months ago Amherst (Mass.) College gave him a Phi Beta Kappa key, and last Saturday, recognizing him still further as one of the outstanding students of his class, granted him a fellowship to continue his study of medicine at a graduate school.

This school will not be Hopkins, although it is located at Mr. Chambers's backdoor. The presence of the anti-Negro germs at Hopkins, which kept him from attending the college in his home town, will see to it that he betakes himself to Boston or New York or Chicago.

For this, Dr. Welch must, of course share the blame, because in his fifty years of germ seeking, he hasn't discovered this most malevolent microbe of race prejudice which keeps millions of white people in America half sick all the time, and dwarfs the souls and minds of the entire white South as the hookworm dwarfs their bodies.

In this light, Dr. Welch, hailed as great, isn't so wonderful, after all. Here was a famed physician using a microscope to find bugs too small to be seen with the naked eye, while all around him anti-Negro pathogenic bacteria increased, multiplied and carried their poison into every part of the city from his laboratory as a center.

To Baltimore, Johns Hopkins University and Hospital, have been a model. Give Dr. Welch

credit for the building of the medical school and he must likewise assume the responsibility for the race prejudice and lack of toleration there.

At eighty, his work is about done. He'll soon put his test tubes and beakers away, and devote himself to something else besides bugs and serums; and well he might, for the biggest and worst bug carried on for a half century under his nose without his ever noticing its presence.

SO. BALTIMORE GETS NEW BABY CLINIC

Mayor Dedicated New Dispensary Opened by Health Department
After American
URGES NEW SCHOOL

McGuinn Calls Attention to Dilapidated Building

One of the recent outstanding events in South Baltimore was the dedication by Mayor Broening of the newly opened baby and dental clinic at School No. 106 Wednesday.

The clinic was opened by the city health department and is the outgrowth of the work of a group of women of South Baltimore under the lead of Mrs. Jennie Mills.

More than five years ago, Mrs. Mills, president of the 22nd ward branch of the Co-operative Women's Civic League, conceived the idea of and realized the necessity for a baby clinic in South Baltimore. The women of the group worked untiringly and unceasingly until now their dream is an established fact.

Mayor Broening was present and dedicated the clinic. He was deeply interested, for on the very spot of School No. 106, he attended school as a boy.

Want School Renovated
Councilman Warner T. McGuinn took the opportunity to call the attention of the mayor to the condition of School No. 106, and urged him to have some of the school loan used to renovate this building and make it habitable. Councilman Walter Emerson, Ward Executive Warrenberger, and Dr. William H. Warthen, chief of the Bureau of Child Hygiene, were also present and spoke.

Dr. Harry F. Brown is the physician in charge and Miss Louise Adams, a graduate of Freedmen's Hospital, is the nurse in charge. Dr. J. A. White has charge of the Dental Clinic.

Miss Hazel A. Macbeth, executive secretary of the Co-operative League, told the group of their opportunity for service and urged them to use this clinic to its fullest capacity.

Rev. Walter English, pastor of John Wesley M.E. Church, and Dr. Daniel Carroll also spoke. Mrs. Fernandis, president of the League, congratulated

ed the people of South Baltimore on another step forward. Mr. Brown and the Rev. James also spoke.

Inspection of the clinic followed. John Cotton is principal of School No. 106.

Health - 1930

Mississippi.

MONTGOMERY, ALA.
ADVERTISER

APR 2 - 1930

HOOKWORM IN MISSISSIPPI

The Jackson Daily News rejoices in the news that hookworm is becoming "an almost obsolete disease" in Mississippi. The morbidity section of the State Health Department's report for February showed only 231 cases of hookworm among whites and 23 among Negroes.

The Daily News remarks that it is hardly more than a decade since "thousands" of cases of hookworm were reported each month. That paper concludes its clinical note by giving what Mencken calls a "hangman's wink," and saying:

Apropos of those 231 cases now existing, it should be borne in mind that there are 189 members of the Mississippi Legislature.

You see, hookworm disease "is characterized by extreme lassitude, lack of energy, and unwillingness to work. It is rarely fatal."

TIME HAS TOLD THE TRUTH

Figures compiled by the Health Conservation association since 1926 show a decline in the tuberculosis death rate among Negroes. This association, which cooperates with the health department and all health agencies, speaks with authority. Not only have the deaths decreased, but the number of cases now among us is declining. It is to our own efforts, that credit for this gain is chiefly due, because it was only last November, two months ago, that we were given hospitalization for tuberculosis such as whites have had for many years. The hospital at Leeds now in operation, has beds for almost all among us who have tuberculosis. The Health Conservation association has confidence in the efficacy of the hospital treatment, and predicts cure for the majority who go there.

The association's figures are convincing proof how grossly we were libeled by the sensational "Tuberculosis Survey" of 1927. It charged that Negroes in Kansas City had "blocks and blocks of houses each of which had harbored from one to ten cases of tuberculosis" and that "scores of Negro women go out to work in the homes and factories of white people leaving two and three tubercular children at home." No wonder the daily press printed it! No wonder white employers discharged us by the hundreds. It has taken these years, with steady improvement of our health conditions to overcome the falsehoods of that survey. Time has told—the truth about Negro health.

NEWSPAPERS AND HEALTH

Few people realize the risk newspapers take when they protect the public's health from malpractice. The campaign now being carried on by the Kansas City Star against the Brinkley hospital and every other such effort to stop men from putting profit ahead of service in dealing

with human suffering are journalism in its most unselfish form. Constructive health articles, treatises on sanitation, first aid, exercise, diet and the like, are so usual that newspapers get no marked attention for what they do for the public in that way. But there should be gratitude—and substantial returns—when they thrust their protecting arm between the unprincipled doctor and his victim.

Service to the sick grades all the way down from the best to the worst. Unlike craftsmanship, medical treatment is a mystery to its purchaser. The individual gives faith to the most intelligent, best prepared and most earnest doctor or to the most ignorant and heartless quack with the same ease. He does not know. The code of the medical profession, under which the ethical doctor keeps silent about patients, serves to conceal the malpractice of the quack. The newspaper, not being bound by any such rule of silence, faces a real problem when it undertakes to save the uninformed from the clutches of the profit-seeker. A newspaper spends much money to make investigations. It risks its invested capital in libel suits. It cannot collect a cent of direct income for what it does, but on the contrary actually forfeits business. Its only recompense is the satisfaction that slowly the wolves who fatten on human misery are being driven out. The doctor who fakes treatments, who slows down his patient's recovery in order to add to his fees, the abortionist, the butcher who leaves a trail of the dead behind him because he is too ignorant to treat suffering, these as well as the pure quacks are attacked by newspapers at great expense and risk.

Health-1930

New Jersey

NEWARK, N. J.
STAR-EAGLE

APR 25 1930

FIGURES RELEASED ON TUBERCULOSIS

52 Per Cent of Negro Cases of State Are in This County.

Of the 20,520 living cases of tuberculosis recorded in the past five years by the New Jersey Department of Health more than 60 per cent were between the ages of 15 and 39. These figures were obtained from a study recently completed by Miss Beatrice A. Myers, statistician for the New Jersey Tuberculosis League.

It was found that 12 per cent of the cases listed were under 15. This leaves 28 per cent as 40 or over. In the counties Salem stands out with 68 per cent between 15 and 39 and Hunterdon is conspicuous as having only 49 per cent in that age period. These facts may be peculiarities due to the small numbers involved or to the make-up of the populations. Salem County has more female cases than male, which may partly account for the greater predominance of cases in that age period. Other counties with a majority of female cases do not show such a large percentage, however. These are Burlington, Camden, Cumberland, Monmouth, Morris and Ocean counties.

Camden County has 21 per cent of its cases under 15. In Sussex 19 per cent and in Union 15 per cent are under 15. Burlington, Cumberland, Ocean and Warren have less than 10 per cent of the cases under 15. Burlington has 14 per cent of the cases over 55, while Cumberland, Cape May and Hunterdon have 12 per cent over 55. The State as a whole has only 8 per cent over 55. Cape May, Sussex and Warren have over 15 per cent between 45 and 54, while the State has only 11 per cent in these age groups.

Morris County was said to have a high rate because of the State Insane Asylum at Greystone Park. Of the 668 cases reported, 292 are from the institution. All of these cases are over 15 years of age; 200 of them occur fairly evenly distributed between 25 and 49 years of age. Over half, 170, are females. Only seventeen are Negro. Those figures

probably reflect the composition of the insane population.

The Negro problem in the counties was studied only for those counties which had over 4 per cent of its population Negro, or a Negro population of over 5,000. This includes twelve counties. Essex County has the largest Negro problem. Although Negroes make up only 5 per cent of all tuberculosis cases in the State, it has 52 per cent of all the Negro cases. The Negro population in Essex County makes up only 25 per cent of the total for the State. Monmouth, Mercer, Burlington and Salem have Negro case rates twice or more than twice those of the white case rates.

Records for the six largest cities of New Jersey show that the case rate for Newark is 913, although that of Essex County is only 790. Only 40 per cent of the cases are female. This was said to point to industry as the main cause of tuberculosis in Newark. Newark has 778 or 82 per cent of the Negro cases in Essex County. Of these 45 per cent are females. Nineteen per cent of the Negro cases in Newark are under 15 years of age, although among the white cases only 13 per cent are under 15.

Health - 1930

New York

Harlem Health Agency's Study Shows Huge Decrease in Deaths Since 1910

Underdaw news 12-17-30
new york mir
**Report Places Negro Population at 369,000
and Asserts Queens Mothers Lost Only
69 Babies of Every 1,000 in 1929**

The mortality rate for Negro infants in New York has taken a drop of 61 per cent since 1910, according to a report by Godia J. Drolet, consulting statistician of the Harlem Tuberculosis and Health Committee, of 108 West 136th street.

The study was made from records of the Health Department, showing the distribution of 7,384 births in New York in 1929. In 1910 infant mortality of the colored was at the rate of 260 per 1,000 births; the 1929 rate was down to 101, or 61 per cent lower, a tremendous gain. During the same period the infant mortality among white children was reduced 54 per cent, namely, from 123 to 56. From the recent figures of births the total colored population of Greater New York is figured by Drolet at 369,000. In Manhattan it is close to 240,000; in Brooklyn, 94,150; in Bronx, 16,350; in Queens, 16,050; in Richmond, 2,600.

In central Harlem there are 133,500 residents. Drolet also found large colonies, numbering some 39,000, in the east Harlem district of Manhattan; 28,000 in parts of Washington Heights; another 20,000 touching Central Park West, on Columbus avenue, and in sections of the Riverside districts, and another 16,000 in the lower west side, particularly in the San Juan and Columbus Hill neighborhood.

"It was striking," said Drolet, "to find health areas in New York City where occasionally the infant mortality of the colored averaged even lower than that of the white babies in the same section. Leading causes of infant mortality among the colored are prematurity, injury at birth, broncho-pneumonia and lobar pneumonia."

Rate Highest Downtown.

"At present," says Drolet, "there are still certain districts in the more congested sections where the local infant mortality rate is high: In the lower west side district of Manhattan, 149 infant deaths for each 1,000 babies born; in central Harlem, a rate of 107 in 1929. Among the colored in Washington Heights it was 96, and in parts of the Riverside health district, only 65.

of New York City as a whole, only 81. This gives Harlem a ratio of nearly 2½ times that of the city as a whole. The death rate from tuberculosis in Harlem rose steadily over the five-year period, while it remained constant in Manhattan and somewhat declined in Greater New York.

The comparison of the Harlem tuberculosis mortality rate with that of the United States as a whole in the report, shows clearly the similarity of conditions in different localities. San Antonio, Tex., and Denver, Col., have the second and third highest tuberculosis mortality rate in the entire country. Harlem stands between these two, showing that the tuberculosis rate there is listed with that of the cities where the most serious conditions prevail, but this disease, happily, is preventable and, if it has gotten a start and is caught in time, it is curable.

Factors that have contributed the most to the general decline of tuberculosis in America have been adequate sanatoria treatment of the tuberculous, education of general public in methods of personal hygiene and the improvement of the economic status of the people in this country. Shorter hours of employment have also been a factor. With a corresponding improvement in Harlem, this locality should show a degree of good results equal to that of any other community. There are excellent facilities in New York and Harlem proper, which can be consulted by anyone with any sort of pulmonary trouble; and a visit to the clinic for examination and a following of the steps recommended to remedy the condition would mean a saving of lives.

Death Rate Dropping.

Harlem has its own problems, chief among which are tuberculosis, pneumonia, infant and maternal mortality. Pulmonary tuberculosis today corresponds to that of the white problem one-quarter of a century ago. The gleam in these dark clouds, however, is the fact that, although the death rate from tuberculosis is now so high as to be three and four times that of the white death rate in the same locality, it is also declining at about the same ratio as it is among the whites. In some places, indeed, such as Tennessee, where especially crowded conditions prevail, the death rate of Negro children in elementary schools is ten times that of white children of the same age.

According to Mr. Nathan's report, it is generally agreed that the susceptibility to tuberculosis is not a race one. The disease comes as a result of environmental factors, of scanty means of support, overcrowding, incomplete personal hygiene and other such evils. In addition to this, it is found that certain immunity to tuberculosis is possessed by people used to city life which is lacking among those coming to crowded quar-

ters from rural districts. There is, however, reason to believe, says Mr. Nathan, that when given a chance in favorable environment and with proper health teaching, any people can overcome diseases which spring from conditions often beyond their control.

Not More Susceptible.

Tuberculosis in infants is especially unnecessary and especially hard to cure. In a study made of over 4,000 cases of tuberculosis in infants, the fact that the Negro race is not more susceptible to the disease than the white, according to Mr. Nathan's report, was again proven when it was shown that practically the same proportion of infection existed among children of both races.

The policy of health education and co-operation in Harlem, which would go so far in eliminating tuberculosis, would also, as Mr. Nathan points out, have the same effect on heart disease and pneumonia, the other leading causes of death. Proper pre-natal care for expectant mothers and understanding of infant care when the baby comes is another important branch of the health education program which the New York Tuberculosis and Health Association and other health agencies operating in Harlem are anxious to foster.

The survey won a doctor of philosophy degree for Nathan at the close of the Summer School term at New York University. Dr. Nathan is now head of the Graduate School of Education at Atlanta University.

Health-1930

Infant Mortality In Greater New York Heaviest in Central Harlem

First Health Center To Be Located At 106 West 136th St., The Mme. Walker Building

More babies are born in East Harlem, more die in Central Harlem and the lowest infant mortality rate is in the lower Flatbush section, of Brooklyn, which includes Bath Beach, Bensonhurst, Ulmer Park and Coney Island. These facts were disclosed by Health Commissioner Shirley W. Wynne upon receipt of the Statistical Reference Handbook prepared by the committee on Neighborhood Health Development appointed by the Commissioner last fall to make a survey of the health districts of the city.

The report gives the City of New York an estimated population of 6,142,189 for 1929. This is an increase of 268,833 over the figure given by the State census in 1925. It also shows that on a school basis estimate the Borough of Manhattan had a decrease of 349,319 population in 1929 over 1925. The Bronx is given a gain of 216,510; Brooklyn, 148,023; Queens, 236,156, and Richmond, 17,463.

The greatest shift in population in Manhattan was on the East Side where there was a decrease of 200,632. The only section of Manhattan showing an increase was Washington Heights where there was a gain of 41,360. In the Bronx, Mott Haven was the only district showing a loss, a decrease of 13,300 being noted. In Brooklyn, Flatbush led every other district with a gain of 112,720, while the Williamsburg-Greenpoint, Fort Greene, Red Hook-Gowanus, Bushwick and Bedford districts show losses. Rockaway was the only district in Queens not showing an increase in population since 1925.

HEALTH DISTRICTS

The hand book, which was prepared in connection with Commissioner Wynne's plan for the establishment of health centres in the various health districts of the city, aims to assist in visualizing these

mean districts and their needs as well as the location of the proposed health centres. A map of each Borough is shown, one to a page, indicating the boundaries of the health district.

On Staten Island there are five such districts; in Brooklyn and Queens, 16; in Manhattan and the Bronx the districts are lower East Side, Lower West Side, Kipps Bay, Lenox Hill, Riverside East Harlem, Central Harlem, Washington Heights, Tremont, Morrisania, Mott Haven, Williamsbridge Westchester, Fordham, Riverdale and Pelham Bay.

TUBERCULOSIS IN CITY

The hand book also brings to light the fact that there were 12,205 new cases of tuberculosis found in the city in 1929. Of these Manhattan led with 5,016; Brooklyn had 3,748; the Bronx 1,960; Queens 1,248 and Richmond 233. The lower West Side of Manhattan, with 1,071 cases, led the entire city. The lower East Side was next with 951 cases, while Central Harlem, the Negro district, had 808. Washington Heights, with 525 cases, ranked lowest in Manhattan. The Morrisania Section, with 488 cases, led the Bronx, while the Pelham Bay section, with 159, was low. The Fort Greene district, with 469 cases, led Brooklyn and lower Flatbush, including Bath Beach, Bensonhurst, Ulmer Park and Coney Island, was low with 212. The Astoria-Elmhurst district, with 406 cases, led Queens, while Rockaway, with 7 cases, was low.

Manhattan led the city in other contagion, including typhoid, measles, scarlet fever, whooping cough, diphtheria, influenza, pneumonia and social diseases. It had 40,499 cases, the lower West Side leading with 7,403; the lower East Side 6,600 and Central Harlem, 6,243. Brooklyn had 26,561 cases, the Fort Greene district leading with 3,665, while lower Flatbush was low with 1,771. The Bronx had 12,447, the Morrisania district leading with 2,626.

and Pelham Bay trailing with 808. In Queens, the Astoria-Elmhurst district led with 1,770 and Rockaway was low with 121.

More people died in Brooklyn in 1929 than in any other section, 26,561 deaths being recorded in that Borough, but the greatest number of deaths in any district in the entire city occurred in the lower West Side, where 5,560 were recorded out of a total of 26,333 for all Manhattan. The survey also shows that Washington Heights had the fewest deaths, 2,841, in Manhattan. The Bedford district led Brooklyn with 3,194 deaths, and lower Flatbush was low with 1,771. The Morrisania district led the Bronx with 2,461 deaths, while the Pelham Bay district ranked low with 830. In Queens the Astoria-Elmhurst district led with 2,713 deaths, while Rockaway, with 121, was low.

Health Center For Harlem

The handbook facts bring to the fore the health districts requiring the most urgent attention, and therefore health centers. The Committee late last year, after a preliminary survey, placed the matter before Mayor Walker, asking that \$4,000,000 be appropriated in the next four years for the erection of four health centers each year. Mayor Walker was enthusiastic in his endorsement of the plan. Commissioner Wynne included in the Corporate Stock Budget for 1930 an appropriation of \$1,500,000 for the Department of Health for the erection of four centers and the purchase of

six sites this year. This has been approved by Mayor Walker and has been placed on the Tax Calendar which is to come up before the Board of Estimate and Apportionment in the near future. It is certain of passage.

The temporary location of the North Harlem Health Center will be at 108 West 136th street, the Mme. Walker building, and the various activities will occupy the entire structure.

This means that the first four health centers in Commissioner Wynn's Neighborhood Health Development Committee's program will be under way this year. The first of these will function in North Harlem, in temporary quarters.

Each health center will bring under one roof the various services of the Department of Health and the voluntary health and welfare agencies, as well as a Baby Health Station, Visiting Nurse Service, Diagnostic Chest Station, Prenatal and Maternity Service, Nutrition and other

services. All these functions will be placed at the disposal of the private physician, enabling him to obtain services for himself and his patients that are not now readily available in the immediate neighborhood.

Health Department Takes Lease On Mme. Walker Building For Its 1st Of a Chain of Health Centers

Dr. Shirley W. Wynne, Health

Commissioner, City of New York, announces that final papers have been drawn and the lease signed for the taking over by the city of the gray stone building at 108-110 West 136th street, long known as the Mme. Walker Studio, for the first of a chain of Health Centers to be opened throughout the city during the next four years in carrying out the plan of the Health Department for closer cooperation with physicians and with the public in preventing disease.

The structure is being painted throughout and generally refurbished for the new activities which will occupy it about June 1. Appropriate exercises will mark the opening of the Center, at an exact date to be announced, and it is confidently expected that Mayor James J. Walker will be present in person. Music will be a special feature.

Harlem Needs Are Urgent

In talking with The Age, Commissioner Wynne said:

"The needs of Harlem are most urgent. The rates for infant mortality and contagion are higher there than in any other single area in the five boroughs.

"Among the causes of infant mortality, premature birth is the highest; respiratory disease second, and gastro-intestinal diseases third. Children of colored parents suffer more from malnutrition and rickets than those of white parentage. Pneumonia seems to be more prevalent and, statistics show that tuberculosis is considerably higher among the colored population of cities than among the whites.

"There are many reasons back of those conditions of course: poor wages causing poor living conditions; the effort of people recently arrived in this city and accustomed

Dr. SHIRLEY W. WYNNE



Health Commissioner

to country life, to adapt themselves to city ways; congested living conditions; lack of knowledge of health fundamentals such as what to eat and how to dress; and failure to establish immunity to certain diseases.

"Naturally, with a health center right in the midst of these conditions, we can deal with them most directly. Already we have the eager interest of the progressive citizens of Harlem in this enterprise."

To Centralize Activities

In the health center will be centralized not only the activities and services of the Health Department, but also the services of private organizations engaged in public health work, such as the Harlem

Tuberculosis and Health Association and the Henry Street Visiting Nurse Service, both located now in the N. Y. Urban League building at 204 West 136th street. The New York Diet Kitchen Association is cooperating with the health center plans by maintaining its baby health station in a locality where it can serve those who are not near the Department of Health's Baby Health Stations.

The Department of Health will maintain at the Central Harlem Health Center a prenatal clinic, the branch office for that district of the Bureau of Preventable Diseases, and the office for the district supervising nurse. For the aid of private physicians, it will maintain a tuberculosis diagnostic station and a similar venereal disease diagnostic station. There will also be provisions for periodic health examinations, but in this regard Commissioner Wynne has expressed himself, "My feeling at this time is that I would rather see the private doctors make the examinations of those who can afford to pay for their services and have the health centers supply such additional diagnostic services as the physicians cannot furnish in their offices—(X-ray of chest and teeth and some laboratory work, such as examinations of blood for sugar and nitrogen, in addition to our present laboratory service such as Wassermann and complement fixation tests.) I would prefer to have the out-patient department of hospitals make the examinations of those who cannot afford to pay.

There will be definite provision for educational work emanating from the Central Harlem Health Center, special lectures and courses in sanitation, hygiene and nutrition for adults and school-children.

NEGRO LAD WINS GOLD BADGE FOR PHYSICAL FITNESS
New York Ad.
6-21-30
New York N.Y.
Gets Highest Honors In
Test of 7,500 Boys at Clinton High School

The highest honors, a gold badge rating, were awarded a Negro boy, R. Kirby, and a Jewish boy, A. H. Weisenfeld, of the DeWitt Clinton High School by school officials last week.

Kirby and Weisenfeld competed with 7500 other boys in the new high school physical fitness tests

DENTAL CLINIC
Age
OPEN AT HARLEM
8-30-30
HEALTH CENTER
New York N.Y.
Open Daily From 9 to 12
For Care of Teeth of Harlem Children

Better care of the mouth and teeth for the children of parents unable to pay the private dentist became a fact on August 21, when a dental clinic was opened in the North Harlem Health Center, 108 West 136th street. The clinic will be open every morning from 9 to 12 o'clock, when a Department of Health dentist will extract and fill teeth of the youngsters of the poor of that section.

The new clinic is just another cog in Health Commissioner Shirley W. Wynne's preventive medicine program. It is pointed out by Dr. Arthur I. Blau, physician in charge of the North Harlem Health Center, that as teeth play an important part in the health it is expected that the new clinic will be of material assistance in improving the health of the children of North Harlem.

From time to time Dr. Blau will give a brief lecture to the children and parents on care of the teeth. He will point out that bad teeth are not always due to too many sweets, but to the lack of the right kind of constituents in the average child's diet.

Health Commissioner Wynne recently declared that the extent of dental decay is so great that merely to treat the present condition, even if the work should be confined to the City of New York alone, all the dentists in New York City could not cope with it and finish it in 15 years.

Means for Prevention

"The only solution of the problem," said the Commissioner, "is to devise ways and means for prevention. To do this successfully, it must be started with children. The two year old child is not too young for his first visit to the dentist. City after city is establishing dental clinics for school children and the Department of Health conducts many clinics in the schools of this city. In addition there are many dental clinics which have been made

possible by philanthropists who have become interested in this phase of preventive medicine.

"The first set of a child's teeth should be given as much attention and care as its second. So called 'baby teeth' have a more or less effect on the permanent teeth and it is for that reason they should be given attention."

In addition to the care of the teeth Dr. Blau will also give talks on oral hygiene. This will cover both adults and children.

BROOKLYN TIMES

DEC 18 1930

Colored Progress Here.

Anticipating the findings of the Federal census which are not complete on the subject, the city Department of Health has estimated the colored population of New York approximately at 370,000. Of this total 240,050 reside in Manhattan, 94,150 in Brooklyn, 16,000 each in the Bronx and Queens, and the slight remainder in Richmond. The Bedford section contains, according to Health Commissioner Wynne's figures, about 33,000, the Fort Greene district 15,000, while the remaining colored citizens are scattered through the borough. The bulletin in the Health Department this week calls attention to the significant fact that in the matter of deaths under one year the city's colored population tends steadily to a lower rate. Thus for the past year the infant mortality rate was 56 per thousand. Rates well below 100 prevail among colored residents of Brooklyn and Queens and even the low figure of 69 has been recorded in the latter borough.

This is a gratifying exhibit of the progress made by our colored fellow citizens.

program, and achieved ratings of 99 per cent.

Health-1930

WHITE PLAINS, N. Y.
REPORTER

JAN 2 1930

COLORED WOMEN IN HYGIENE CLASS

Members of League Tak-
ing Course of Red Cross
Instruction.

In order to be better able to pre-
vent illness and to cope with it
when it occurs in their homes, 17
women of the Colored Welfare
League are taking the Red Cross
course in Home Hygiene and Care
of the Sick under the instruction of
Mrs. J. Winfield. They are learning
the principles of personal hygiene,
how to have a healthful home, how
to care for babies and children,
how to serve competently in com-
mon ailments and emergencies and
how to cooperate in the promotion
and protection of community health.

And it is not all theory; 70% is
practical instruction. The pupils
actually make mustard plasters and
linseed poultices. A large baby doll
serves as the patient when they
learn how to handle and bathe a
baby. Through practice and know-
ing how, the students become ex-
pert at bathing a patient in bed and
changing sheets without moving the
person from the bed.

The value of this class in educat-
ing for greater security and safety
against illness and suffering in the
families of the students and in the
community is self-evident.

This Red Cross course has been
given for several years to different
groups. A minimum of thirty hours
of instruction is required before the
pupil can take the examination and
receive the Red Cross certificate. In
Westchester County this year there
are eight courses being given to the
following groups: Silver Lake
School, Harrison; Continuation
School, New Rochelle; two classes
in Hastings High School; Larch-
mont Girl Scouts; Pelham Girl
Scouts; Colored Welfare League,
here; and a group with the Port
Chester Visiting Nurse. This means
a total of 112 women and girls tak-
ing the course.

Health Commissioner Wynne Issues Statement Concerning Opening of Health Center in Harlem Very Soon

Sixteen Health Centers, Costing \$4,000,000, To Be Erected Within Next Four Years, The First To Be In North Harlem

The opening of a Health Center in Harlem, pro-
jected some months ago by Commissioner of Health
Shirley W. Wynne, and approved by Mayor James
J. Walker, but which was deferred when negotia-
tions looking to the leasing of the Vincent Sanitari-
um for that purpose by the city fell through, now
looms up as an almost immediate certainty, accord-
ing to a statement issued by Dr. Wynne on Thurs-
day, February 6.

The statement was issued follow-
ing a conference between Mayor
Walker and the Commissioner, at
which a number of other important
health officers were present. It was
planned that sixteen health centers
should be erected within the next
four years.

First To Be In Harlem.

In his statement Dr. Wynne has
the following to say concerning the
proposed health center for North
Harlem:

"The first of the health centers
recommended by the Committee al-
ready has approached reality. This
will be located in North Harlem,
which by reason of its peculiar
health needs, and insufficient num-
ber of agencies providing health
service, is regarded as requiring
urgent action.

This district, with an estimated
population of 174,000, is one of the
most congested sections of Manhat-
tan, and in no other place in the
world are so many colored people
congregated.

"Residents of the district have
taken a keen interest in the estab-
lishment of the new health center
and the movement has the ardent
support of the Hon. Fred R. Moore,

Alderman of the 19th Assembly Dis-
trict, and the various social ser-
vice agencies whose work in the
North Harlem district has been co-
ordinated with that of the Depart-
ment of Health. Pending the erec-
tion of a new building the center
will be located in leased quarters.

Thirty Health Districts

Dr. Wynne's plans call for thirty
health districts, each containing ap-
proximately a population of 200,
000, the idea being to keep close
watch on each district, thereby ob-
taining more definite knowledge re-
garding living conditions, sickness
and other data. This would enable
the Department of Health to check
any outbreak of disease in a par-
ticular district, and curb it before
spreading to adjoining districts.

Mayor Walker has approved the
plan to have the Board of Estimate
and Apportionment appropriate
\$4,000,000 in the next four years
for the erection of four health cen-
ters each year.

BINGHAMTON, N
PRESS

APR 1 2 1930
Health Class to Be Formed
Among Negro Children

A junior health department for the
instruction of negro children in dis-

New York.

ease and its prevention will be or-
ganized by Binghamton branch, N.
A. A. C. P., in the society rooms, 68
Sherman Place, Sunday afternoon.

Methods of building strong bodies
through proper exercise, rest and
cleanliness will be emphasized in the
study groups. The children will
study standard charts on food valu-
ation and dieting.

During the summer months the
classes will visit nearby farms to
learn the habits of birds and flowers
and to secure exercise and fresh air.
Plays dealing with cures for various
diseases will be put on by the junior
society to impress upon their minds
the material presented to them in
the classes.

BROOKLYN TIMES

FEB 7 1930

Delay Colored Belt Clean-up Until After Village Vote

Rockville Centre Owners Report Tenants Impoverished as Dr. Jaques Advises Improvements.

Rockville Centre, Feb. 7. — The
clean-up of the colored belt, recom-
mended by A. D. Jaques, health offi-
cer, and subsequently ordered by the
Village Board as a board of health,
has been postponed, until after the
village election, or April 1, said Build-
ing Commissioner James Patten yes-
terday, after a conference with Dr.
Jaques and Tredwell D. Carpenter,
who owns several tenements occupied
by colored families.

Commissioner Patten said that al-
though sanitary conditions are bad
in the section and many of the rook-
eries which shelter numerous families
should be razed, it would work a
hardship at this time on account of
the unemployment and weather con-
ditions and the depressed state of
the building industry. He also said
that if the families were forced out
now to make the necessary repairs,
which some of the owners are willing
to do, they would become public
charges, which would mean the sepa-
ration of families.

Carpenter says he is willing to
make the repairs required by Dr.
Jaques if the tenants will vacate. In
some instances, he said, he would
gladly tear down the structures, but
the inmates have not paid any rent
for several months. On account of
their poverty stricken condition, they

would not be dispossessed by the
courts, even if he cared to adopt such
harsh measures, he said.

"Get rid of the tenants," Carpenter
said, "by providing places for them
to live and obtain employment for
them so that they can pay their way,
and I'll gladly comply with every
reasonable requirement of both the
health and building departments."

Dr. Jaques stated several days ago
that several of the owners had con-
sented to improve the sanitary con-
dition of the buildings occupied by
the colored people and that within a
few weeks sewer connections would
be made in many of the most objec-
tionable places, which would tem-
porarily eliminate any immediate
danger of an epidemic. "Neverthe-
less," said Dr. Jaques, "living condi-
tions are bad in the colored belt and
before long drastic measures will
have to be taken for a general
cleaning up."

Commissioner Patten said that
there is much suffering on account
of poverty in the section, although
the welfare departments of the town
and county are helping the more de-
serving and worthy. "We found one
woman with a baby less than a week
old," said Patten, "where the living
conditions were positively unfit. She
had not paid any rent, she said, in
four months, because her husband
was out of work. She did not want
to go to an institution, which, she
said, would mean separation from
her several children."

National Health Circle Meeting Last Week One of the Most Successful Health Week at 'Y'

Executive Secretary in Splendid Address at Howland Studio as Special Speaker at Musicale and Tea

A musicale and tea of extraordinary interest was held at the Howland Studio, 1660 Fulton street on Sunday afternoon under the auspices of the Erita Club for the benefit of the National Health Circle for Colored People. This affair was attended by over 300 persons who crowded into the studio, and responded to the activities with an interest that was unusual as it was singular.

That the thought of human helpfulness made a great appeal to citizens of Brooklyn there was no doubt, for they manifested this not only by their remarkable attendance, but by the way they responded financially to the appeal that was made to them.

Another of the contributing factors to the color of the program was the announcement and attendance of Miss Fannie Hurst, white, novelist and short story writer, and one of the leading supporters of the race.

The program was opened by a solo entitled "May Morning" from Denza, by Mrs. Rebecca Norcum. Her tone was excellent and her registers were so marvellously made that she was compelled to respond to an encore when she sang "Hail, Hail the Crown" by Robinson. She was accompanied by Prof. Lyndon H. Caldwell. The next musical item that was very impressively rendered was a piano selection by Miss Nataca Marshall, whose contributions were "Lark" by Glinka and the "Arabesque" by De Bussy. Miss Elizabeth Hichman, who recited "Death Banjo" by Paul Lawrence Dunbar, won for herself the plaudits of the audience in her remarkable delivery and near perfect enunciation.

The first speaker was Miss Belle Davis, executive secretary of the Health Circle, who explained its aims. Miss Davis in quite an admirable manner told the group that the Circle was endeavoring to place and maintain in strategic places over the country Public Health Nurses whose duty would be to assist in reducing the death rate of our people, and who would help in stimulating health consciousness within the race.

In quite an effective manner she said that conditions in the rural districts of the South are deplorable and that they are far from what they should be, but they would never improve, neither would they change until there are agencies such as her organization, a club like the Arita, which would give their unselfish and unstinted support to the end that the health condition of the race would be improved.

Drawing a graphic picture she said among other things that "one of the things we need to eliminate is the old mid-wife, the old granny; she has done her duty as best she knew how, but today we need people of education—people who have been trained

properly. If we could eliminate that one thing we would have made an achievement—the old granny on account of her lack of training has not helped the infantile mortality."

She sounded the tuscon for education, arguing that it will help to reduce poverty and ignorance, and would result in improving the health of the children, which is the question of most importance. In recounting the things that the Circle has done she said that at present it is maintaining nurses at Georgia, Florida, Alabama, South Carolina and Maryland, and that it has succeeded in placing one at Poughkeepsie. She further remarked that it gives scholarships to deserving nurses also. She told of a nurse who graduated from Lincoln Hospital, and who was given a post graduate course at Teachers' College, Columbia University, and subsequently sent to Greenwood, S. C., where she is doing a fine work. Commenting on this particular nurse's activities she said that this nurse has completely stirred the district and through her influence there is a dental clinic, a baby clinic and a mother's clinic which are of invaluable service to the community.

Miss Hurst was next introduced by Miss Davis and after thanking the club for its invitations said that she accepted because she believed that the work undertaken was a very lofty one, and that intellect must spring from a fundamental source, which is health. She considered the gallant work of Miss Davis as courageous and claimed that the Negro is going to receive his greatest help from the Negro; the white will probably emulate him, but will not create the effect unless it receives its inspiration from the race. With Mrs. Davis she entreated the vast audience to co-operate.

It is important to point out that Miss Hurst was born in St. Louis, Mo., and on account of this fact is in a position to know of some of the obstacles which confront the race. She was accompanied by Mrs. Wymann.

Others who spoke were Mrs. Helen Curtis, a board member of the Circle, Miss Eva D. Bowles, a member of the Circle, Miss Eva D. Bowles, a member of the National Board of the Y. W. C. A., Mrs. Ada B. Thoms, author of "Pathfinder," a book dedicated to colored nurses and which is now in some of the leading universities including Columbia.

The officers of the Erita Club are: Mesdames Ethel Holmes, president; Adelle Walton, secretary. Those of the National Health Circle for Colored People are Dr. J. E. Moorland, president; Miss Belle Davis, executive secretary; Mrs. Adah B. Thoms, Dr. Louis T. Wright, and George F. Peabody, vice-presidents.

After the meeting tea was served.

The annual Y. M. C. A. celebration of Health Week will begin Monday at the West 135th street branch. A series of meetings has been planned.

"Sex and Marriage" will be the topic for discussion Monday evening. Drs. Alonzo deG. Smith and Mae Chinn will be the principal speakers and will lead the discussion.

"Quackery in Harlem" will be the subject of an address on Tuesday evening at the same time by Dr. James J. Jones. Dr. Oma H. Price is also scheduled to speak at this meeting on Wednesday evening, Dr. Peyton F. Anderson will discuss "Tuberculosis: Early Discovery; Early Recovery." These three programs will be held under the auspices of the Senior Department of the branch.

Thursday and Friday evening's programs will be in charge of the boys' department and will consist of the showing of motion pictures dealing with various phases of child health. All of the meetings will be held in the main auditorium of the branch and will begin promptly at 8:30 p. m. The entire series of the week is to be sponsored by the physical education department of the branch under the direction of Lawrence F. Hunt, director of the department.

NEW YORK JOURNAL

Harlem - Bronx
APR 28 1930
**First Health
Station in
Harlem**

The negro section of Harlem, most densely populated section in New York, is to have the first of the public health stations in the Board of Health's Neighborhood Development Committee's programme, it was announced today

by Commissioner Shirley W. Wynne.

The Health Department will take over the entire building at 108 W. 136th St., next Thursday and a full staff of physicians, nurses and clerks installed. The most modern of health apparatus and machinery will also be used making this new station a model centre for the sixteen others to follow.

Commissioner Wynne also pointed out that the second station to be opened would be in The Bronx but he declined to make public the location at this time. Four stations a year will be erected, Dr. Wynne declared, and each centre is estimated to cost \$250,000 with the running cost fixed at \$6,500 a year.

"The station in North Harlem will be housed in temporary quarters." Commissioner Wynne stated, "until we can build a permanent home in the same section. The building we are going to occupy is ideal for our needs. We will be able to house under one roof the various services of the Department of Health and the voluntary health and welfare agencies."

Health - 1930

North Carolina

Rocky Mount, N. C., Telegram
Friday, May 16, 1930

REPORT GIVEN ON NEGRO ACTIVITY

**Health and Welfare Worker
Makes Report on Three
Months' Service**

Health activities among the Negro population of the community were summarized in the report of Cora L. Parker, half-time city nurse and welfare worker, as made public today. The report covers the three months period for which the work has been carried on here under the sponsorship of the Mary B. Talbert club.

The report follows:

February 28th, 1930. First months report of these three months experience sponsored by the Mary B. Talbert club.

Through the aid of the colored and white Associated Charities and the health department one hundred and two (102) needy families were investigated. Out of the above number ninety percent of these families were aided, given work, food and fuel. Twenty-five sick visits were made. Through the courtesy of one of our physicians free medical aid was given. The Y. M. C. A. gave a number of meals.

March 31st, 1930. Second months report.

Sixty visits were made. There were found four Tubercular cases. Advice was given to the families on how to care for the patient and how to guard themselves against this most dreaded disease. The number of mothers visited with babies twenty. Advice was given on how to care for these babies. Health literature on babies was also left. The number of needy cases investigated twenty-five, and through the aid of the colored and white Associated Charities and the health department we were able to help six of these families with groceries. One pitiful case of Pellagra was looked after and advised.

April 30th, 1930. Third month's report.

A clinic was held during National Negro Health Week. Through the aid of our colored doctors and dentists, one hundred and two children were examined. Some were found affected with bad tonsils, weak lungs and bad teeth. Others were under nourished. Advice was given to mothers on how to care for these children. Health lit.

Henderson, N. C. Dispatch
Wednesday, June 4, 1930

CLINICS HERE TO INCLUDE COLORED

**Those Desiring Examinations
Asked To Call at
Health Office**

Tuberculosis clinics for adults to be held in this county for two weeks, beginning Monday, June 16, will include examinations for colored as well as white people, it was announced today by Dr. F. R. Harris, health officer. The clinics will be held at the Scott Parker Tuberculosis Sanatorium.

Dates for the colored people and the place for them to report will be announced later, the health officer stated.

It was emphasized, however, that those wishing the examination, which will be free of cost to those taking them, should call in person at the health department to make an engagement, so that there be no misunderstandings or conflicts as to the time when individuals will call at the hospital.

erature was distributed. Twenty-four sick visits were made. Five needy cases were investigated. Two of these were found very needy and helped. One very sick boy was found in a vacant house with Pneumonia. He was lying on a pair of springs with one old quilt wrapped around him. We were able to get a woman to take him into her home and through the aid of the Health Department and one of our doctors we were able to save this boy's life.

We decided the best way to help our people was to organize Mothers' Clubs in the different sections of the city. The motive of these clubs is to reach the mothers in the lowly walks of life and to advise the men how to care and rear their children. We are planning to use in these clubs different books on Child Welfare, such as 'The Child, His Nature and His Needs' and also Health Literature. Through these clubs we are hoping to make our environments and our children better.

We have organized three clubs with twenty-five mothers and we hope soon to have our mothers organized and through them we hope to teach them their duties to their children and to God. Winston-Salem, N. C. Sentinel

Thursday, May 1, 1930

SENTINEL CHILD WELFARE

Winston-Salem Health Work Knows No Color



Negro mothers at Baby clinic. Most effective work is done among this class, the mothers showing special interest in the instructions given.

Carolina's Suicides

The North Carolina State Board of Health announces that the annual white suicide rate for the past sixteen years is 5.4 per 100,000 population; the average suicide rate for colored people is 2.

Every year in North Carolina 14 colored and 19.3 whites commit suicide. The explanation of the department is that the colored people are an extraverted race. They do not brood. Nordics are said to be introverted.

Knowing North Carolina as we do, these figures indicate to us that Negroes have more to worry about in North Carolina, but whites do the most worrying.

If whites had our difficulties along with their great tendency to worry, fret, stew and finally commit suicide, it appears that their suicide rate would equal our death rate from tuberculosis.

Health-1930

South Carolina

Charleston, S. C., News & Courier
Wednesday, December 10, 1930
BENEFIT AT DARLINGTON

**Spirituals Concert Given by
T. B. Association**

Darlington, Dec. 9.—A public singing of negro spirituals, by a number of well known negro singers of Darlington was given at the Liberty theater on Sunday afternoon for the purpose of raising funds for tuberculosis work in Darlington county. The affair was put on by the Darlington County Tuberculosis association and a large gathering was present to enjoy the fine singing. A large sum was realized from the undertaking. The meeting was presided over by the Rev. C. R. Cody, president of the Darlington County Tuberculosis association, and Dr. F. H. McLeod, of Florence, was the chief speaker. This has been an annual event in Darlington for several years and is looked forward to from year to year.

THE COLUMBIA CLINIC ASSOCIATION

This Institution Offers Medical Inspection and Free Vaccination to All

Negro Children of this City

Palmetto Leader 9-20-30
The Columbia Clinic Association that the people were anxious for the inspection and free vaccination to all and permanent headquarters. Through the assistance of some friends, Dr. Evans was able to secure the old corner of Lady and Harden Sts. In making up a report for the first month's work of the clinic permanent headquarters for the work have been examined and 800 vaccinations made without making any charge to the parents of the child and a child habit clinic in connection with the regular work has been established. In speaking of the work of the new clinic, Dr. Evans said last night: "The health conditions among our people in the city is alarming. I have been distressed to find so many children under weight, under nourished, and actually suffering for the lack of simple treatment that would give better health to so many children. Before we were able to set up our work we had to educate people up to the idea of having such an institution. We went from church to church and from school to school and as a result we find more work to do than we can handle. I believe the Columbia people would support the new clinic who are one of the best known physicians of the city. Last spring she called into conference a group of business men of the city and laid plans assured us that in the near future we may be able to add to the work a day nursery. "We wish the public to know that services at the clinic is free." directors Willis C. Johnson of the Miss Olympia Harris, who has had special training in clinic work in New York City, has been secured and is now in charge of the administration work at the Columbia Clinic Association with Dr. Evans for the good of the new project.

The Negro Clinic was first started in the basement of Zion Baptist

State Tuberculosis association. Mrs. McDonald spoke interestingly to the group of Negro workers, covering all phases of the work to be done in the campaign which opens tomorrow. The group appeared anxious to help prevent the further spread of the disease among their people—a disease which has brought a heavy death rate among the Negroes.

Other speakers at the meeting were Harry E. Daniels, Eldee Dozier, supervisor of Negro schools in Spartanburg county and special state organizer of the Christmas seal campaign among Negroes. Many short talks were delivered by old county workers who had signal success in the seal campaign last year.

Before the close of the meeting it was suggested that the second Sunday in December be known throughout the state as tuberculosis Sunday and that all ministers in Negro churches in the counties in which the campaign is being conducted be asked to deliver a special sermon on the ravaging effect of tuberculosis among Negroes, present the work of the association and ask his congregation to contribute a collection for the cause. The county chairmen will furnish the ministers all necessary assistance in making the day far-reaching in results.

The conference agreed to have a speaker's bureau from which communities needing persons to deliver talks in the campaign could obtain them by writing the state chairman.

Wednesday, December 10, 1930

*Fredermont
Greenville, S.C.*
FEB 4 1930

Contrasted Mortality Rates

The infant mortality rates by color in the city of Greenville in 1929, as published in the Bulletin of the City Health Department:

White 71.1 per 1,000.
Colored 107.1 per 1,000.

"This very high rate among the colored infants", the Bulletin comments, "is obviously due to the very bad hygienic surroundings, to the almost utter lack of pre-natal care and to the lack of proper nourishment of the mothers and babies".

The spiritual avers that "All God's chillun got wings", which is a matter of the hereafter; as a matter of the earthly present all of them do not have similar opportunity merely to live.

Columbia, S. C. News
Sunday, November 30, 1930

NEGROES SUPPORT

HEALTH DRIVE

Leaders Pledge Aid After
Hearing Mrs. McDonald.

(Written for The State.)

Orangeburg, Nov. 29.—Speaking to a group of Negro leaders in the Y hut at State college this morning, President R. S. Wilkinson said that conditions throughout the country are more alarming at present than they were during the World war.

"Two calamities are upon us—the dreaded disease known as tuberculosis and unemployment, larger now than in any other period of our history. We must fight and fight co-operatively until we have economic betterment in health and happiness throughout the country."

The meeting in State college was a special gathering of the county chairmen who are handling the Christmas seal campaign among the Negroes in the 29 counties where there are no local health units. All of these 29 counties had representatives who said they are willing to use every means possible to raise the desired quota of \$2,000 as set by the general committee of which Doctor Wilkinson is the chairman.

After opening the meeting with appropriate remarks, the chairman presented Mrs. D. McL. McDonald of the

MONTHLY HEALTH REPORT RELEASED

Births In City During November
Lead Number Of
Deaths, 60 To 34

A total of 32 white births and 26 colored births was recorded in the city during the month of November according to the monthly report released yesterday by the city health department. White deaths totaled 19 and colored deaths numbered 15. Resident deaths occurred as follows: four stillborn, three hypostatic pneumonia, 12 heart and one of the following: pellagra, intestinal obstruction, cancer, hemorrhage and bronchial pneumonia. Non-resident deaths were as follows: two automobile accident, one intestinal obstruction, one kidney, two syphilis and one from other causes.

Health - 1930

TUBERCULOSIS AMONG NEGROES IS STUDIED

Included on Program of National Association Meeting.

The problem of tuberculosis among negroes, and how to lower the high mortality rate, will be subjects of a special session of the National Tuberculosis Association at Hotel Peabody May 7-10. The medical section of the sociological section Thursday, May 8, will be given over to a study of tuberculosis among negroes. Dr. W. S. Leathers, Nashville, is chairman and Dr. M. F. Haygood, Knoxville, secretary.

In the pathological section, of which Dr. J. Burns Amberson, Jr., New York, is chairman, and Dr. R. S. Cunningham, Nashville, secretary, one of the papers on Friday morning, May 9, will be on "Pathological Peculiarities of Tuberculosis in Negroes," by Dr. Max Pinner, Northville, Mich.

The Shelby County Tuberculosis Society will be host to the specialists, tuberculosis executives, board members and others. The Tennessee association is co-operating, as is the Chamber of Commerce Convention Bureau.

Campaign Among Negroes.

The society will co-operate with other agencies in Memphis in observance of National Negro Health Week, March 30-April 6. Mrs. L. M. Neblett, executive secretary, said yesterday. Health posters will be placed in the negro schools and other meeting places of colored organizations.

The annual Early Diagnosis Campaign throughout the country will be held in April. The society will put on the educational campaign in Memphis. By means of billboards, posters, street car cards, and other mediums, the message will be brought home to the community that tuberculosis can be cured, and that early discovery means early recovery. "Let your doctor decide" is the advice given to all who have any symptoms that indicate the possibility of tuberculosis.

The executive committee faces a full schedule at its meeting this week, with an early diagnosis campaign in April, a national convention early in May, and imminence of the vacation season with plans for the annual health camp to be decided.

NEWS CHATTANOOGA, TENN.

MAR 18 1930

South Leads in Births

Recently we printed statistics exploding the theory that "informal lynching," the term applied to promiscuous killing of negroes by white persons, is widespread in the South. We are interested, also, in disproving the fallacious argument that the birth rate of negroes in the South greatly exceeds that of white people.

W. S. Thompson, director of the Scripps Foundation for Research in Population Problems, finds that the birth rate for the country has fallen alarmingly. In 1910, the rate was near 30 per thousand in those cities of the United States which kept accurate records. Now it is 19.7. The South, however, continues on an even keel. It is true that the birth rate of negroes is 26.2, as compared with the 19.7 rate for the country. But the white race in the South has a slightly higher birth rate than the negro race. In other words, both races of the South have a high birth rate as compared with the rest of the country.

Birth rates per thousand in eight Southern states for 1927 were: Alabama, white, 26.5, colored, 26.4; Florida, white, 25.5, colored, 23.9; Kentucky, white, 25., colored, 19.2; Mississippi, white, 28.4, colored, 26.7; North Carolina, white, 28, colored, 30.5; South Carolina, white, 27.3, colored, 26.5; Tennessee, white, 22.3; colored, 20.5; Virginia, white, 22.5, colored, 24.4.

The high birth rate in the South is encouraging to this country, although the low birth rate elsewhere is disconcerting. Experts attribute the South's steadiness in this respect to "environment." We suspect climate has a lot to do with it. The principal reason why the high birth rate of the South is encouraging is that it proves that the old race, the native stock of the country, is not dying out, as is so often shouted to the housetops. The native stock is more than holding its own.

It is good for the South to be peo-

pled by its own stock, both white and black. It is highly encouraging that, while the birth rate has been dropping in East, North and West, it has kept steady in the Southern states.

MEMPHIS, TENN. PRESS-SCIMITAR

FEB 17 1930

NEGROES PLAN HEALTH DRIVE

Doctors Hope to Cut Down Disease Rate

An intensive campaign to improve health conditions and cut down the death rate among Memphis negroes will start this week with the opening of free clinics.

This was announced Monday by Dr. W. S. Martin, president of Bluff City Medical Society, composed of negro physicians and dentists. He also is superintendent of Collins Chapel Hospital, 418 Ashland st.

The clinics, open to all negroes who are unable to pay for medical attention, will be at the hospital. The medical clinic will be open from 2 p.m. till 4 p.m. each day. The dental clinic will be open at the same hours, except Saturdays, when the hours will be 9 a.m. to noon. Special attention will be given the teeth of school children.

The clinic will have the following departments: Internal medicine, surgery, diseases of children, obstetrics, diseases of women, eye, ear, nose and throat, social diseases, pharmacy, laboratory.

The campaign, Dr. Martin points out, will be of interest to all citizens, as anything tending to decrease disease protects the whole community. He also promises full co-operation with the police.

Appoint Director
Of Social Disease
For Tennessee
7-17-30
Knoxville Tenn

DR. W. A. MASON GETS

TENNESSEE POST

BALTIMORE, Md.—Communica-

Tennessee

tions were received here this week, announcing the appointment of Dr. William A. Mason, senior interne at the Provident Hospital, as director of venereal diseases among Negroes for the State of Tennessee.

The newly appointed director will have headquarters in Nashville, beginning his new duties on October 1. After establishing his office, he will take a six-week intensive training course for specialist in social diseases at Hot Springs, Arkansas.

The physician, who in the field of social diseases, was appointed director of the newly opened research department of the Tennessee board of health from among nearly six hundred applicants.

An Ohio Man

Dr. Mason is a graduate of the Meharry Medical College, class '29. While still a student he made several remarkable finds while doing research work in various fields. During the course of his medical training he led his class. He was chosen a member of the Chi Delta Mu Scholastic Medical Fraternity as a result of his excellent work. He was also appointed to the Kappa Pi Honorary Medical Fraternity for his high standing during the course of his training.

The physician attended primary and secondary schools at Cincinnati, Ohio, his native home. He received his collegiate training at Ohio State University.

KNOXVILLE, TENN.

JOURNAL

AUG 7 - 1930

NEGRO HEALTH UNIT SOUGHT

Physician Will Confer With Rosenwald Fund for Aid.

Dr. H. M. Green, Knoxville negro physician, leaves Tuesday for Washington, D. C., to confer with representatives of the Julius Rosenwald fund on securing aid for a negro unit to be built to the Knoxville General hospital. Dr. Green conferred with City

Manager George Dempster, Director of Welfare Rex Wallace and Dr. S. M. Clark, president of the East Tennessee Hospital association.

"We expect to be able to offer the Rosenwald officials something concrete this time," City Manager Dempster said.

Representatives of the fund have been in Knoxville several times during the past several months for conferences with city officials and the East Tennessee Hospital association.

They indicated the Rosenwald fund would be willing to give at least \$25,000 and possibly more towards the cost of establishing the unit in conjunction with the Knoxville General hospital.

Dr. Tallafiero Clark, senior surgeon in the U. S. public health service and consultant to the Rosenwald foundation, went over the local situation, and recommended his fund give twenty-five per cent. of the total cost necessary to build the unit.

The city's share would be financed in next year's budget or taken out of the 1930-31 permanent improvement fund issue.

Covington, Tenn. Leader
Thursday, October 9, 1930

Dr. Owen F. Agee Now Has Colored Assistant

Dr. M. B. Allison, acting director of the Tipton County Health Unit, states that Dr. M. A. Mason, colored, a graduate of Meharry Medical College, Nashville, arrived Monday to begin his duties as clinician in the offices of Dr. O. F. Agee. Dr. Agee heads the project sponsored by the Rosenwald Fund and acting in conjunction with the Tipton County Health Department, which is seeking control of the disease of the blood among the colored people of the south.

In this connection Dr. Agee advises that "this work in Tipton county is being carried on nowhere else in the state. All members of the colored race should most positively take advantage of this free examination." Dr. Agee again urges families to come in groups. Those needing treatment will be given such treatment without charge. The clinic was well attended last Saturday, although the fact that this is the cotton picking season has somewhat curtailed response.

Blood examinations will be made all day next Saturday in the Rosenwald clinic in the Hill building, and also at Mason at some place that will later be designated.

To Conduct Survey of Health Survey Among Tipton County Negroes Negroes Ready to Begin

A survey of Tipton county to determine the prevalence of disease among negroes here will be undertaken in the immediate future, it was announced today by Dr. A. J. Butler, director of the County Health Unit. In an interesting interview with Dr. A. J. Butler, director of Tipton County Health Unit, he states: "Organized in the immediate future, it was announced today by Dr. A. J. Butler, the extent of chronic diseases among the colored population of Tipton county is progressing satisfactorily."

The survey will be conducted under the direction of the State Department of Public Health co-operating with the Tipton County Health Department. The Rosenwald Fund, a philanthropic organization of Chicago, will assist in financing the project, Dr. Butler explained. This survey is something new in the way of state contact with the health of its citizens. Dr. Butler further informs us that the project is being carried on through the co-operation of the State Department of Public Health and the Julius Rosenwald Fund. Offices have been obtained upstairs in the Hill building, north side of the public square, entrance being by stairway in the rear of Whitaker's old store.

At least one year will be required to complete the survey and possibly a greater length of time will be consumed to bring all positive cases under proper treatment. "Equipment is being installed," says Dr. Butler, "and Dr. Owen Agee, of the Tennessee Department of Health, has been here for several days directing the work which will begin and hours made public for the taking of blood specimen as soon as the necessary supplies arrive." Dr. O. C. Menger, of the United States Health Service, is also here assisting in the preliminary work and will return from time to time, as consultant with Drs. Agee and Butler. "Dr. Menger," Dr. Butler states, "has had considerable experience in this work which is yet in its infancy in southern states. Tipton is the only county in Tennessee which enjoys the distinction of being the seat of such a survey at this time."

The study and survey is to be conducted in an effort to determine the percentage of negroes in Tipton county infected with disease and the possible difference in percentage of infection in urban and rural areas. The difference in percentage of infection in negroes and whites of a given area will also be considered. The most practical measures of treatment and control of the disease will be studied and demonstrated in the project.

A blood test of at least 2,500 negroes of the county will be undertaken as the initial step in the work. Upon request, blood tests will also be made of persons attending clinics at the County Health Department to determine the number of persons suffering from disease.

All persons who are found to be infected will be placed under treatment and efforts will be made to have the treatment continued for a sufficient length of time to prevent the spread of the disease.

Dr. Owen F. Agee, formerly health officer of Dyer county, will be in charge of the work. Dr. Agee has recently completed a special course of study at the United States Public Health Service at Hot Springs, Ark.

Dr. W. A. Mason, graduate of Meharry Medical College in Nashville, who is now completing his internship at Provident negro hospital in Baltimore, has been retained as a negro clinician for the work. Laura Campbell, negro public health nurse, formerly of the city nursing staff of Nashville, has been retained as negro nurse for the work.

Plans for the survey have been approved by members of the medical profession in Tipton county, the Tipton County Board of Health and the County Health Department.

The survey is the first of its kind to be attempted in Tennessee.

TIMES HERALD
DALLAS, TEX.

JAN 27 1930

CLINIC ROOMS FOR NEGROES REOPENED

The Dallas Tuberculosis association, of which John W. Everman is president, reopened its clinic rooms for negroes at the McMillan sanitarium, Hall and State streets, last Thursday and the first of the weekly clinics will be held Thursday of this week at 2 p. m.

Dr. W. R. McMillan is in charge of the medical staff. The clinic is free to those who cannot afford to pay for the examination. A registered negro nurse and a competent physician will be in charge each week. The association is an agency of the Community Chest.

N. Y. Journal of Commerce

JUL 12 1930 NEGRO DEATH RATE IN TEXAS TOO HIGH FOR EXCLUSIVE RISK

(Special to The Journal of Commerce)
AUSTIN, Texas, July 11.—The death rate among negroes in Texas is approximately 25 per cent higher than that of other races in this State, the State Insurance Department believes, and for that reason, coupled with the fact that insurance premiums on Negro policies are based on the same mortality rate as are premiums for other races, exclusive Negro insurance companies in this State are in a poor financial condition. Although no exact statistics have been compiled by the Texas department, records of Negro insurance companies operating on mortality rates of other races show that these companies cannot survive, whereas other companies can.

Mortality Among Houston

* * * * *

Negroes; Some of the Causes

Houston Informer
Jesse O. Thomas, southern field director of the National Urban League, said last week: "In compiling the data on the mortality of Negroes in the city of Houston while making a recent survey of that city, I was interested and very much surprised to find that the death exceeded the births for the year of 1928. There were 37 more deaths among the Negro population than there were births for the same period. This condition in itself should suggest to the Public Health officials, the Negro leaders, and the citizens in general the urgent need of a further study of the conditions under which this element of our population lives, in order to determine what should be done to change this alarming situation."

The Harris County Afro-American Medical Society of which Dr. C. W. Pemberton is president is acutely aware of this dangerous predicament and is earnestly working to eliminate it. But, the active cooperation of the city and county health officials, social agencies and citizens must be secured if they are to succeed.

This condition is not due to any inherent lack of resistance on our part to certain diseases or to our inability to adjust ourselves to the complexities of life about us. The cause may be found in our financial inability to secure proper living conditions, proper food, and necessary medicine and medical treatment; in the absence of sufficient playgrounds; in the lack of swimming facilities; in the need for a more widespread knowledge of the fundamental rules of health and right living. Economic mal-adjustment is probably the largest single factor in this deplorable situation. What assistance we receive now as a matter of mercy would be granted us as a matter of right if we possessed the ballot. As long as that is denied us we must garner what little help we can from those who believe we should have decent living conditions, while we continue an unrelenting fight for our political rights.

We are hopeful that the figures for this year will show that births exceed deaths in our groups, as otherwise there exists a serious handicap to our progress. The theory of birth control lends very little weight to this condition among Negroes, regardless of its effect on the statistics for whites.

Health - 1930

Virginia.

THOUSANDS TAKE ADVANTAGE OF ITS FACILITIES

Examinations Show Need Of Careful Health Work

ter weight, under nourished, and actually suffering for the lack of some simple treatment that would give better health. Before we were able to set up our work we had to educate people up to the idea of having such an institution. We went from church to church and from school to school and as a result we find more work to do than we can handle. I believe the people will support the new clinic nicely. Already friends have paid the rent for two months, given furniture and other equipment and have assured us that in the near future we may be able to add to the work a day nursery. We wish the public to know that services at the clinic is free.

Olympia Harris, who has special training in clinic work in New York City, has been secured and is now in charge of the administration work at the clinic.

Clinic association, an institution offering medical inspection and free vaccination to all Negro children of the city, has been established by Dr. Matilda Evans and is located at Lady and Harden Streets. In making up a report for the first month's work of the clinic Doctor Evans said that 3,800 children have been examined and 800 vaccinations made without making any charges to the parents of children.

The recent examination of a large number of children of the Negro race in Columbia has revealed some startling information as to health conditions. Out of each 100 children examined, Doctor Evans says that 90 per cent had bad tonsils, 90 per cent, decayed teeth, 4 per cent, had curvature, 2 per cent had enlarged heart with skin eruptions, scabies, ring worm and other diseases noted in the checkup.

The idea of organizing a clinic to serve the children of her own race in Columbia is original with Doctor Evans. Last spring she called into conference a group of business men of the city and laid her plans before them for organization. To head the board of directors, Willis C. Johnson of the Johnson-Bradley, undertakers was elected president. He is associated with four other well known Negro business men and his committee is working co-operatively with Doctor Evans for the good of the new project.

The clinic was first started in the basement of Zion Baptist Church, merely as a tryout. The first day the clinic was opened 700 came in which showed that the people were anxious for the service and also the need of a bigger and more permanent headquarters. Through the assistance of some friends Doctor Evans was able to secure the old building at Lady and Harden where she hopes to make permanent headquarters for the work, in this building rooms are provided for special classes in mental hygiene which are taught by Doctor Evans, and a child habit clinic in connection with the regular work has been established.

In speaking of the work of the new clinic Doctor Evans said: "The health conditions among our people in the city is alarming. I was distressed to find so many children un-

Health - 1930

Virginia

HEALTH WILL BE COLLEGE PLANS COURSE MAJOR INTEREST FOR NEGRO PHYSICIANS OF VA. SOCIETY

12-27-30

Negro Organization So- ciety Praises Nor- folk Endeavor

Norfolk, Va.

RICHMOND, Va.—The central committee of the Negro Organization Society met December 18 in the office of Mrs. Maggie L. Walker, St. Luke's Building, Richmond, Va. The meeting was attended by all of the fifteen members except one.

The members confined their conference strictly to a constructive program for the year. It was decided to make health its major objective. Already the organization is carrying two free beds in the Piedmont Sanatorium, at Burkville, and raising funds for the support of the nurse now employed to instruct mid-wives in the following eight counties: Brunswick, Greenville, Mecklenburg, Norfolk, Nottoway, Prince George, Princess Anne and Southampton.

It was decided that an aggressive campaign will be put on to provide a rural health nurse fund, with a view of placing a nurse in some of the counties and districts to guard the health of children. It was agreed that an educational health drive will be made through a number of counties by a group of health instructors.

Dr. John H. Proffitt of the Piedmont Sanatorium was at the meeting and gave an interesting talk on the sanatorium and tuberculosis.

The president and members of the Negro Organization Society are greatly delighted and interested in the organized group of our people in Norfolk in their endeavor to raise a quota that be put to them for a tubercular hospital in or about Norfolk. It is a laudable cause and should appeal to all of our people.

The officers and members of the Negro Organization Society are in hearty accord with the leaders and workers in this campaign for the care of tuberculosis patients. Doctor S. F. Coppage, the director is to be congratulated on having been able to harness up many of the loyal citizens in the organization.

NEGRO HEALTH MEETING TO BE HELD HERE TUESDAY

The annual health meeting of the Parent-Teacher Leagues and the Ministers Alliance, will be held next Monday night at 8 o'clock at the negro Y. M. C. A., on Marshall Avenue.

State and local speakers will make addresses and the report of the Child Welfare Committee will be presented which will include the health rating of the city.

Post Graduate Clinic Will Begin June 18, It Was Announced.

12-27-30

RICHMOND, Va., Dec. 20.—(P)—Dr. W. T. Sanger, president of the Medical College of Virginia, today announced that a post-graduate clinic for negro physicians will be established by the college in connection with St. Philip's hospital, to begin June 18.

President Sanger said it would be the first medical venture of its kind in the south.

The clinic is designed to supply post-graduate courses for the state's negro physicians and will be backed by the full facilities of the college and aided by one or more of the big scientific foundations, Dr. Sanger added.

Plans for the educational venture, viewed here as a pioneer effort that may pave the way for further advances in the professional education of the negro in the south, are being worked out in co-operation with the negro physicians and a five-year program is being prepared to consist of from one to four weeks' intensive clinical training annually under the best modern guidance. The general plan has been under consideration at the college for several years and the clinic is designed to enable negro physicians to keep up to the minute with the developments in their profession.

Atlanta, Ga., Constitution
Sunday, December 21, 1930

COLLEGE PLANS COURSE FOR NEGRO PHYSICIANS

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Health - 1930

NEWS

Suffolk, Va.

JAN 2 1930

SUFFOLK, HEED THIS APPEAL

In another part of this paper appears an appeal from a widely known and highly esteemed Suffolk woman who is seeking aid for the colored citizens who are hopelessly ill of tuberculosis and whose presence in their own families and upon the streets is a menace to the public. This lady sets forth the fact that the Negroes of the city, led by a very earnest and untiring woman of that race, have of their own means to a large extent created the nucleus of a hospital for the care of those unable to help themselves. The city council has assisted by the donation of certain old buildings at the Booker T. Washington school. Except to purchase and pay for the land and draft the plans of the group of buildings the undertaking has made no further progress.

The plan now is to abandon the more ambitious program and in its stead erect a temporary but substantial building in which to care for those Negroes who are now too far gone to hope for a cure and thus remove them from contact with well people and at the same time alleviate their sufferings until they pay the penalty this insidious disease exacts of those who are unable to check its ravages in the beginning. It will require more money than is now at hand or in sight to do this. The good Samaritan who is making this appeal in behalf of the sufferers is unable to carry the load by herself and everybody knows that the colored people cannot even in self-protection do much. But the fact that they have gone the very limit to help their afflicted brethren should draw to them the support of every generous minded citizen of the community with the means to help.

The white people of Suffolk, aside from the humanitarian phase of the situation, should feel impelled to take some action to prevent further inroads by the disease upon their own race. As pointed out, from these afflicted homes come their servants, their washwomen and others whom they employ about the house. Often these unfortunates are far-gone with the disease before they themselves know it. Cases are known already where children of white people here have contracted tuberculosis from their nurses or other servants around the house. When a few hundred dollars will establish quarters large enough to care for the more desperate cases, can the well-to-do white citizens of this city afford to turn

away from the opportunity to protect themselves and their own loved ones?

The News-Herald hopes that every charitably disposed and humanitarian citizen of this city will contribute something to this cause—for humanity's sake and for protection through prevention. There are too many cases of tuberculosis in Suffolk and its environs and there will be many more before the year ends unless heroic steps are taken to check its spread. Those who have the best interests of the city at heart, property owners, business men and manufacturers will be doing their community a good turn and making an investment for themselves by taking steps to have the score or more of dying men and women, walking scourges in fact, sequestered in some place where they will not only be given the necessities of life but rendered physically unable to come in contact with and communicate their malady to others.

RICHMOND, VA.

NEWS-LEADER

JAN 9 1930

NEGRO MORTALITY SUBJECT OF TALK BY HEALTH LEADER

Dr. W. Brownley Foster Is
Speaker at Annual Conference
Ending in City.

The annual conference of state health workers today brought to a close a four-day meeting here by holding a joint session with the Virginia Public Health Association at which Dr. W. Brownley Foster, director of public welfare for the city of Richmond, presided.

The forenoon joint session at the parish house of St. Paul's church was marked by the presidential address delivered by Dr. Foster on the subject of "Negro Mortality." Other prominent speakers at this session were Dr. Charles R. Grandy, of Norfolk, president of the Medical Society of Virginia and Dr. S. J. Crumbine, executive secretary of the American Child Health Association.

Dr. Grandy spoke on "Co-Operation between Physicians and Health Officers," and Dr. Crumbine gave a report in regard to the White House conference on child health.

Following luncheon today the joint session was resumed at the parish

house and the afternoon was devoted to the consideration of several papers on subjects pertinent to public health work.

Speakers at the afternoon session were Homer N. Calver, executive secretary of the American Public Health Association, who discussed the functions of a state health association; Dr. C. T. Outland, of the Richmond health service, who spoke on the hospitalization of contagious cases; Dr. L. E. Sutton, of the Medical College of Virginia, who had as his theme the diagnosis of scarlet fever, and Dr. Fred J. Wampler, professor of preventive medicine in the Medical College of Virginia, who presented the diagnosis of "Ascaris Pneumonia."

Section Meetings.

The final day of the health workers' conference was marked not only by the general joint sessions held with the health association but also, as on preceding days, by several section meetings.

The sanitation officers' section held an afternoon session today from 2 to 5 o'clock, with James W. Smith presiding, and heard a practical discussion of septic tank construction, the speakers being L. B. St. Clair, of Roanoke county, and M. Lee Hawley, of Washington county.

The nurses' section, also held a section meeting at Cabariss hall this afternoon, at which Miss Alice B. Dugger, American Red Cross representative, presided, took up a consideration of the health program in the schools which was led by E. V. Graves, of the state department of education, and Miss Frances Barringer, of Charlotte county. Miss Agnes Randolph was also a speaker and had as her theme the methods of co-operation between the tuberculosis out-patient service and the local health organizations.

The conference of state health workers, which closed with the several general and sectional sessions held today, has proved one of the most successful and largely attended conferences of the kind ever held in the state, and has been the occasion

for a gathering here of some 150 men and women who are engaged in public health work in Virginia on an all-time basis of employment.

RICHMOND, VA.

NEWS-LEADER

MAR 11 1930

HEALTH AID FOR NEGROES PLANNED

Essex County Woman's Club
Will Push Efforts Among
Children.

TAPPAHANNOCK, Va., March 11. —(Special to The News Leader.)—At a meeting of the executive committee of the Essex County Woman's Club plans were made to aid in the health work for Negro children in the county. Mrs. Mattie W. Blakey is chairman of the committee on public health and social service. She appointed the following committee to help through the schools to increase the number of 4-point homes in the county: Mrs. E. L. W. Ferry, chairman; Mrs. Peyton Hundley, of Center Cross; Mrs. John Ware, of Ware's Wharf; Miss Eva Gresham, of Tappahannock, and Mrs. Fanny Ellis, of Lloyds.

Plans reported by Mrs. Fanny Ellis, chairman of the garden division, to ask the Boy Scouts under the leadership of H. S. Osborn, to aid in the campaign for the eradication of caterpillars, were approved.

Mrs. John Bareford, of Center Cross, was appointed to write a history of the club for the State Federation of Women's Clubs.

The committee met in the home of Mrs. C. A. Warner, vice-president. Others present were: Mrs. Felix Wilson, Mrs. T. H. Warner, Mrs. Fanny Ellis, Mrs. John Haile, Mrs. H. S. Osborn, Mrs. Charles Gresham and Mrs. Mattie Blakey.

Newport News, Va. Press
Tuesday, April 8, 1930

NEGROES OF CITY HOLD HEALTH MEET

The community health committee of the Federation of Colored Women's clubs sponsored a community health program, at Zion Baptist church Sunday afternoon. Dr. P. A. Scott made an address in which he

pointed out the progress in health education and improvement among the colored people in Newport News during the past 25 years. Much has been accomplished and the interest is ever growing in the health activities as shown by Dr. Scott.

The Rev. J. J. Posey, chairman of the child welfare committee, said that the ministers, parents, and teachers would endeavor to place child welfare in its proper relation with Christian social service. This effort is as much a part of the religious interest and activity as any other church program, he said.

"It is very hard to believe that if the Russian church had been working for the advancement of child welfare and human happiness, those who had been benefited by such efforts would be persecuting the church," he added. It is a warning for the American church, and in proportion as we emphasize a program of the Master, in that proportion the church and its progress will proceed with full approbation forward.

King's Daughters Clinic Points Out Needed Health Units

MISS BLANCHE F. WEBB, director of King's Daughters Clinic, Norfolk's divinely-inspired institution for the care of children, in a published statement last week very thoroughly refuted the assertion made recently by a correspondent in a letter to our local evening paper, to the effect that about twenty colored children to one white attend the clinic; but Miss Webb went farther than that, for she pointed out two conditions that exist among the colored population here which press immediately for the best thought of the leadership of this community. The statement concerning racial attendance at the clinic was made by a white citizen in her effort to prove that the colored people here are not "under-privileged," but are, in the matter of public charities, the largest beneficiaries. Of course that twenty-to-one assertion falls flat in the face of the clinic director's explanation that the attendance approximates the 50-50 basis.

More important, however, are the conditions pointed out by Miss Webb, showing that Norfolk is without adequate Day Nursery facilities for colored children, and sadly lacks pre-natal clinics and free beds for colored maternity cases. Both of these public welfare deficiencies, it is shown, not only exercise a large negatory influence upon the clinic's health work, or the health work of any other agency, upon Negro children, but that the latter shortcoming also helps to maintain a high maternal mortality rate among colored women. Much of the work performed at the clinic is of a nature that requires family cooperation for several months if the child is to derive the highest benefits from it. In this connection Miss Webb makes this pertinent statement:

Many colored children are dismissed from the wards as cured or improved; for we need the beds for very ill babies. These babies, or children, go home; soon they are back with us again. Why? Because they cannot receive the proper care at home. Many colored mothers work and their babies are cared for by older children, very old women and neighbors. Sunshine available for everybody, or which should be available for everybody, is often not for these babies; intelligent care is often lacking and so they become ill again. A Day Nursery for colored children, with porches, a playground, and large airy rooms is needed; with a good woman in charge and under the supervision of a nurse, trained in infant feeding, much good could be accomplished.

That statement carries a serious reflection upon our sense of social responsibility. It is not conceivable that any insurmountable problem would be confronted in any well-directed effort to establish an adequate Day Nursery for colored children of this city. Community cohesiveness and a keener sense of social obligations on the part of our more influential element of citizens are the chief needs to meet this situation.

As to the other condition, the lack of pre-natal clinics and free maternity beds, Miss Webb

Another sad situation is lack of proper care for colored mothers. We have pre-natal clinics and free beds for white maternity cases. Free beds for colored maternity cases are hard to find. Adequate maternal care for the majority is impossible at present.

If we had a center, a Maternity Center, with many free beds, and if we had nurses trained as mid-wives, who could work from the center, caring for mothers in their homes, unless the case was complicated, and if the beds were available and doctors available at the center for the abnormal cases, then our maternal mortality rate among colored women could be reduced.

Admittedly this a condition that presents a far more difficult problem than the one seen in the Day Nursery situation. Nurseries may be started with a nominal outlay of finances and equipment, but hospitals are things quite different. While the development of a first-rate Negro hospital and maternity clinic in this city is an objective toward which our group needs to bend every effort, obviously some sort of a solution to the free maternity bed problem as affects the colored mother ought not have to wait upon this development, which frankly, is yet in the distance. The most logical and the most equitable solution of the problem should and must come through the cooperation of the municipal and hospital authorities in our city. Community hospitalization is in a very large sense a public obligation, and so recognized in every enlightened community. The principle can be carried to the reasonable, fair end, just conclusion that will provide free maternity beds and pre-natal clinics for the colored women of this city, based upon the facilities already existing here. Social justice demands it.

SENTINEL

FITCHBURG, MASS.

APR 26 1930

BLACK MIDWIVES

What is America? You visit New York's new medical center. Here, you say, is America. The architect, the builder, the engineer, the artist, the decorator, the chemist, the physician and the surgeon have pooled their knowledge to erect a cathedral of medical science, where disease may be attacked according to the latest rules, and babies may be ushered into the world under the best possible conditions. Here, indeed, is America.

You step into an airplane at New York, fly a few hours, and land in an open field in Virginia. Nearby you see the drab exterior of a Negro church. You peer through an open window. There are three score Negro women listening to a white woman. The white woman is Mrs. Bennett, inspector of midwives in the state department of health. The dark women of the audience are her pupils.

Some are smoking old clay pipes, others are chewing snuff or tobacco.

The older women, already veteran practitioners in midwifery, start out with new shiny shoes upon their feet. But as the meeting proceeds, one by one they quietly slip the shoes off their feet to sit in barefooted contentment. Occasionally a pupil pad-pads to the open door to expectorate.

Mrs. Bennett inspects the midwives' equipment. Carolyn Conant Van Blarcom tells the story in the February Harper's. "At the early classes these outfits are of every size, shape and color and range from well-worn purses and tobacco pouches to large satchels and carpet bags." Aunt Georgina beams proudly as she displays her equipment, "consisting of a small shining vanity case sent by her daughter from New York at Christmas." It contains "a tiny mirror, pink compact, a medicine dropper and a bottle of murky looking fluid," which she explains is April snow water for the new baby's eyes.

"Ain't nuttin' better," she says, "fo' babies' eyes dan Ap'il snow wattah. Mah'ch snow is good, but Ap'il is de bes'."

Mrs. Bennett listens to the dark women tell the secrets of their profession. She hears her pupils express the greatest faith in the medicinal properties of a left forefoot of a blind mole, of hog's foot oil and of wild boars' teeth. She remains serious and attentive as she is told how to chase "de ebil spir'its" away from the mother and baby by placing one of the husband's old black hats on the patient's head and one of his soiled shirts upon her body.

Is the little church with its classroom of Negro women also America? Between the immaculate and up-to-the-minute equipment of New York's medical center and Aunt Georgina's vanity case and murky snow water is all the difference between the science of 1930 and the black magic of Africa. Yet the barefooted, tobacco-chewing group of black midwives are just as much a part of America as the white-coated, rubber-heeled internes of the medical center.

America is a glorious country, but its vastness covers a variety of life and living that most of us have hardly begun to understand.

More Light On Tuberculosis

IT is a well established fact that Negroes die faster from tuberculosis than white people do. That is to say, the death rate in proportion to population is much higher among Negroes. This has been so marked for the past thirty years that it has become a fixed opinion in the minds of many students of health conditions that Negroes are more susceptible to the disease than whites are, and once they have it they are less able to resist it than white people are. There is a tremendous amount of scientific data to support this opinion. Still open-minded and unprejudiced authorities on tuberculosis are finding—and admitting—that given the same economic conditions under which the whites live the death rate from tuberculosis among Negroes rapidly declines. It has been established also by recognized authorities that while our death rate at the present time is higher than that among the whites it is declining at about the same ratio as among the whites. An editorial in the *Journal Of The Outdoor Life* (New York City) arrives at the following conclusion:

"Whether the Negro has any inherent biological susceptibility to tuberculosis that is different from that of other people, is a much disputed point. It is, however, agreed even by those who contend most vigorously for the biological hypothesis, that the environmental factors of scanty means of support, overcrowding, ignorance of the elementary rules of personal hygiene, superstition and many other social and economic evils that attend a lower standard of living, have played a prime role in the large tuberculosis mortality and morbidity among Negroes.

"... In many respects the Negro tuberculosis problem is analogous to that of the white problem twenty-five or thirty years ago, and there is every reason to believe, therefore, that if the same type of intensive effort is expended on the control of tuberculosis among Negroes that has been employed in the last two decades among whites, equally favorable results can be obtained."

That, in a nutshell, is the enlightened viewpoint on the whole question of tuberculosis. It is not shared, it is sad to relate, by all authorities on the disease, nor by all the machinery that has been set up for the control or eradication of it but it is encouraging to note that the organ of the National Tuberculosis Association should disseminate that opinion. Practically the whole of the September number of the *Journal of the Outdoor Life* was devoted to articles on tuberculosis among Negroes.

It is agreed among health authorities that Negroes are by far the greatest sufferers from tuberculosis and that their death and morbidity rates are much higher than is true of the whites, and as a matter of public health, and in view of the contagious nature of tuberculosis, it would seem that the men of science would want to attack tuberculosis at its chief source. Tuberculosis will never be removed as a source of danger to the whites until it is eradicated or controlled among the blacks. The racial contacts are too close. The spread of the disease from one race to the other is inevitable. So, until the whole attack upon tuberculosis takes the spirit and form expressed in the quotation above from the *Journal of the Outdoor Life* we shall have slow and tedious progress in its eradication.

Health - 1930

West Indies.

N.Y. TIMES

JAN 19 1930

FINDS NEGROES AGED AT 30 IN WEST INDIES

**Physiologist Declares Habits and
Diet Materially Shorten Life
and Affect Manpower.**

Special Cable to THE NEW YORK TIMES.

PORT OF SPAIN, Trinidad, Jan.

18.—West Indies negroes are too old at 30, suggested Professor Seagar of the Rockefeller Chair of Hygiene at the Imperial College here, in an interview today.

"A preliminary survey I have just concluded, dealing with 700 workers on twenty sugar and cocoa estates, reveals the workers are aged at 30, with marked heart and blood vessel deterioration, and by 40 they are handicapped seriously, with their expectation of life shortened."

He blames especially the extensive use of tinned milk and recommends the keeping of goats. He mentions also the unusually large proportion of income spent for tobacco and alcohol. Contrary to the general view that negroes have excellent teeth, Professor Seagar declares a large percentage have defective teeth, due to an excess of starch and sugar in their diet.

"The psychology of the tropical workers has been hitherto a Cinderella psychology, but research in the important field of industrial manpower in temperate climates shows that diet and fatigue are points affecting the willingness to work, which must influence the cost of the production of sugar," Professor Seagar says.

"While factory methods in the tropics have been radically modernized to compete in world markets, field conditions remain unchanged since the primitive régime. Investigations reveal that the average worker works only twenty hours a week."